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Bulletin

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1917

Health Department

JANUARY, 1917.

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CITY OF MILWAUKEE

Published Under the Direction

of

GEORGE C. RUHLAND, M. D.

*Commissioner of Health
of the
City of Milwaukee.*

F. W. LUENING,
*Deputy Commissioner,
Editor.*

LEOPOLD SCHILLER, M. D., Asst. to Commissioner.

E. T. LOBEDAN, M. D., Asst. to Commissioner.

GEORGE R. ERNST, M. D., Supt. of Tuberculosis.

E. V. BRUMBAUGH, M. D., Bacteriologist.

RUSSELL W. CUNLIFFE, City Chemist.

GEORGE E. ADAMS, Registrar of Vital Statistics.

F. T. THOMSON, M. D., Chief Sanitary Inspector.

H. H. BRYANT, D. V. S., Chief Meat Inspector.

STANLEY S. PILGRIM, M. D. C., Asst. Chief Meat Inspector.

FERD. MACK, Division of Contagious Diseases.

Bulletin of the Health Department

JANUARY 1917

One of the means of maintaining health during the winter months is to engage in winter sports. Such sports are attainable to practically all of us. We can skate on the rivers or in the parks. We can use the toboggan slides in the parks or we can tramp through the snow in the parks or the surrounding country.

Winter sports do more toward giving bodily health than similar exercise in the out-of-doors in any other season of the year. All of us have felt the glow that comes after strenuous out-door exercise in the winter time.

The city has given us parks and other recreation places far superior to anything that can be found outside of cities. In fact, the cities make our sports easy to carry out. Sections of most of the parks in the city have been roped off and set aside for coasting and in virtually all of the parks skating rinks are maintained.

If the inclination for winter sports is not sufficiently great to induce us to engage in them, then we can at least engage in walking and this compensates for the lack of exercise that so many of us suffer from, due to our occupations. In several cities of the country a "Walk to work" campaign has been inaugurated. If such a campaign will actually result in inducing numbers of people to walk to their work, it will accomplish great good. However, it should not require a campaign to induce us to do the things that will insure the best health. Good health is so eminently desirable, that the mere suggestion that something is good for us, should be sufficient. And there can be no question that walking to work or walking anywhere else will give us that out-door exercise which our sedentary lives and in-door occupations make so essentially necessary during the winter months.

PATENT MEDICINES

MEDICAL ADVERTISEMENTS:

Milwaukee newspapers like newspapers in other parts of the country continue to accept patent medicine advertisements. Naturally these advertisements are a good source of revenue and that is the reason for taking them. It is not probable that the papers will exclude from their columns objectionable advertising matter of this kind, so long as it is a good source of revenue. Therefore, Milwaukeeans are urged to consult the Health Department before using or purchasing any of the patent nostrums that are advertised in the city's papers. The Health Department will not be able to give information concerning all of them. New remedies are constantly being prepared for the market and old remedies are constantly being sold under new names. In fact, this latter idea is well worked out by the patent medicine manufacturer. As soon as his nostrum becomes the subject of investigation or his business is too closely scrutinized by local, state or federal officials, he changes the name of his remedy, thus offsetting the chemical analyses made in the past, and compelling those who are investigating to start all over again. He thus gains much time. He is able to continue foisting his fake upon the public, until new investigations again compel a change in name. At least half of all of the remedies, nostrums and medical frauds that were upon the market when the "Great American Fraud" was published by Colliers, have since changed their names, and now appear under new labels and a new set of wrappers. It is astounding to what lengths some of these changes have gone. For instance, that prize fakes, "Nature's Creation," formerly was sold as a cancer cure. Its manufacturers saw no reason for not switching it

to the field of tuberculosis, when that field promised greater profits, so "Nature's Creation," one time remedy against all cancerous growths, is now the well known and sure cure for consumption in all its phases.

So the Health Department urges that inquiry be made and if the information be available the Department will be glad to give it to any one contemplating the use of an advertised or patented medicine. If the information is not available the Health Department will be able to make analyses or get analyses that others have made in a brief period of time.

DR. FRANCK'S GRAINS OF HEALTH:

Among the frauds recently advertised in Milwaukee papers were "Dr. Franck's Grains of Health." These magical pills, which, according to advertisements, relieve "indigestion, constipation, stomach diseases, congestion, all fever cases, headaches, loss of appetite, dizziness, etc.," are merely laxative pills, essentially Aloin. A box of them is worth about 5c. Said box sells for 50c, so the margin of profit is a fairly good one. The ailments listed as likely to be relieved by the pills are symptoms of constipation. Insofar as the pills are laxative they will, of course, relieve these symptoms. As for their curing or relieving "all fever cases" — this naturally is pure bunk. The pills will not relieve all fever cases, nor will they relieve any fever cases, except perhaps a feverish condition due to constipation. The pills will not relieve "headaches," except when due to the same cause. Nor will they relieve "loss of appetite," nor "dizziness," nor "stomach diseases," nor "indigestion" any more than a spoonful of castor oil will relieve these same ailments.

As has been said before, the patent medicine manufacturer has reaped an enormous harvest in the United States by trading on the almost national trouble, constipation. He

lists symptoms which most persons who are troubled with constipation suffer from. In most cases the victim does not know what his real trouble is, and when he buys a sugar coated laxative and finds that it is curing his headache, his backache, his dizziness or the pain in his stomach, he thinks that someone has concocted a wonder working medicine. In reality, a little licorice, a little plain bran, plenty of water, or, if need be, an oil, would accomplish quite the same results.

The principal objection to patent laxatives lies in the fact that the average human system, becoming accustomed to them, no longer performs its normal functions without them.. Laxatives never should be regularly taken except under the directions of a physician.

Returning to the "Grains of Health": On the assumption that they are not actually harmful, except as any cathartic is harmful, there is yet this factor to consider: the price at which they are sold is out of all proportion to their value. The Indiana Board of Health rather well covers this phase of the situation in the following:

"We believe it is vicious practice to sell poor people who can spare but little money for medical attention, drugs or chemicals at prices far in excess of their real value, and such business is the more to be condemned because the facts are concealed behind misleading and disguised names."

HEADACHE CURES:

Among the remedies that are regularly advertised and more regularly used are the various headache cures. One of the dangerous elements of the most of these cures is acetanilid. The American Medical Association recently analyzed a number of well known remedies of this kind and found that they contained this dangerous drug in approximately the following proportions:

	Acetan- ilid	Caffein	Sodium Bicarb.	Citric Acid	Ammon Carb.	Sodium Salicy- late
Ammonal.....	50	..	25	..	20	..
Koehler's Headache Powder.....	76	22	..	..	..	..
Antikamnia.....	68	5	20	5	..	..
Orangeine.....	43	10	18	..	..	..
Phenalgin.....	57	..	29	..	10	..
Salacetin.....	43	..	21	..	..	20

Following this analysis and agitation against this type of drugging, some of the manufacturers substituted for acetanilid, phenacetin. This drug is little better than the first one which the government now requires to appear upon the label. Among the remedies in which they made this substitution were Antikamnia tablets, these tablets being advertised for "headaches, neuralgia, grippe, pain and fever.

Bromo-Seltzer, widely used and widely known, also, contains acetanilid, or, at least, did contain this drug when the American Medical Association's analyses were made. Bromo-Seltzer is particularly dangerous because many persons, especially women, take it frequently and some of them take it daily. Illness and death have been reported following such regular use.

Capudine is among the nostrums listed as objectionable. It has been found to contain antipyrin and caffein, both of which are dangerous. In one instance death is attributed to the use of Capudine, a report coming from Covington, Ga., the victim being Mrs. Joe Winburn, of Mansfield, reported as having taken an overdose of Capudine for periodical headaches. In this instance the victim was the wife of a Baptist minister, and left five small children, the oldest being nine years.

Kephalose is another headache cure containing antipyrin and caffein.

It is far safer to let the headache cures alone and rely on proper diet, but if the headaches persist, better a reliable physician to cure the cause, than drugging the symptoms without curing the cause. Drugging soon becomes habitual and it is quite possible that it may soon result in death.

FOOD:

(From "How to Live". By IRVING FISCHER and EUGENE LYMAN FISK, M.D.)

One reason why many people eat great quantities of food without realizing it, is the common delusion that many articles such as candy, fruits, nuts, peanuts, popcorn, often eaten between meals "do not count." Another common oversight is to overlook accessories, such as butter and cream, which may contain more actual food value than all the rest of a meal put together. Ice cream and other deserts have more food value than is usually realized. Nature counts every calory very carefully. If the number of calories taken in exceeds the number used by the body (or excreted unused), the excess accumulates in fat or tissue. Thus, if some 3,000 calories are taken in each day and the calories used up or excreted are only 2,800 then 200 must be retained and accumulated in the body.

A person who is not heavy enough can usually gain weight by following the general rules of hygiene, especially in the matter of increaseing the fuel or energy foods. But he should not force himself to eat beyond his natural capacity to digest and assimilate the food, while overfatigue and exhausting physical exertion should be carefully avoided.

As age advances the consumption of meat and all flesh foods should be decreased and that of fruit and vegetables, especially those of bulky character and low food value, such as lettuce, tomatoes, carrots, turnips, salsify, oyster-plant, watercress, celery, parsnips should be increased.

Each individual must decide for himself what is the right amount of food to eat. In general, that amount which will maintain the most favorable condition of weight. If the weight, endurance, and general feeling of well-being are maintained, one may assume that sufficient food is taken.

As has been pointed out before, it is physical, not mental work that uses up the greater part of our food. The impression that brain-work or expenditure of mental energy

creates a special need for food is erroneous. The sedentary brain-worker often gains weight without eating very much. What he really needs is exercise, to use up the food, but if he will not take exercise, then he should reduce his food even below the small amount on which he gains weight.

Which meal in the day should be heavy and which light depends largely on one's daily program of work, the aim being to avoid heavy meals just before heavy work. When very tired it is sometimes advisable to skip a meal, or to eat very lightly, as of fruits and salads. A man who eats heartily when he is very tired is apt to be troubled afterwards with indigestion.

It has been stated that food is fuel. But there is one constituent of food, which, while it can be used as fuel, is especially fitted for an entirely different purpose, namely, to build tissue, that is, to serve for the growth and repair of the body. This tissue-building constituent in food is called protein. The two other chief constituents in food are fat and carbohydrate, the last term embracing what are familiarly known as starch and sugar. Fats and carbohydrates are only for fuel and contain carbon as the essential element. Protein contains nitrogen as the essential element in tissue-building. The white of egg and the lean of meat afford the most familiar examples of protein. They consist entirely of protein and water. But meats and eggs are not the only foods high in protein. In fact, most ordinary foods contain more or less protein. The chief exceptions are butter, oleomargarine, oil, lard, and cream—which consist of fat (and water) — and sugar, sirups and starch, which consist of carbohydrate (and water).

Foods should be so selected as to give to the ration the right amount of protein or repair-foods, on the one hand, and of fats and carbohydrates, or fuel foods on the other. A certain amount of protein is absolutely essential. While, for a few days, protein may be reduced to little or nothing without harm, if the body be long deprived of the needed

protein it will waste away and ultimately death will result. Therefore, too little protein would be a worse mistake than too much.

The right proportion of protein has been the subject of much controversy. According to what are regarded as the best investigations, it is generally about 10 per cent of the total number of heat units consumed. This does not, of course, mean 10 per cent of the total weight nor 10 per cent of the total bulk, but 10 per cent of the total nutriment, that is, 10 calories of protein out of every 100 calories of food.

Most persons in America eat much more protein than this. But that 10 calories out of 100 is not too small an allowance is evidenced by the analysis of human milk. The growing infant needs the maximum proportion of protein. In the dietary of the domestic animals, the infant's food, the mother's milk, is richer in protein than the food of the grown animal. Consequently an analysis of human mother's milk affords a clue to the maximum protein suitable for human beings. Of this milk 7 calories out of every 100 calories are protein. If all protein were as fully utilized as milk protein or meat protein, 7 calories out of 100 would be ample, but all vegetable proteins are not so completely available. Making proper allowance for this fact, we reach the conclusion that 10 calories out of every 100 are sufficient.

MEDICAL SCHOOL INSPECTION:

The Milwaukee Health Department will undertake the medical inspection of parochial school children in the immediate future. This service was accorded by the Common Council after it had been favored by the heads of the denominations conducting schools in the City of Milwaukee.

The service has long been needed, since there are more than 25,000 children attending parochial schools in the City who, heretofore, have been without periodic examinations by physicians. This has meant that illness or minor ail-

ments had time to develop and become serious illnesses or ailments before the family physician was called upon to correct them. Such illnesses and ailments may be and frequently are contagious in nature and may equally involve a comparatively large number of persons.

The danger of spreading contagion is primarily great where a comparatively large number of persons are congregated together for considerable periods of time. For instance, despite the efforts of school physicians, it is a fact that annually with the opening of the schools, there is a large increase in contagious diseases. It is not contended that this increase is due entirely to congregating children at school, for the reason that it comes at a time of the year when the entire population takes to the indoor life and when people everywhere congregate indoors in greater numbers than has been true during the preceding summer months. Nevertheless the bringing together, in rooms, of thousands of school children unquestionably affects the situation and is a large and important factor in increasing the number of cases recorded. Typhoid, scarlet fever, whooping cough and measles are among those diseases that regularly show increases in the fall.

Since public and parochial school children mingle to some extent after school hours and during their periods of recreation it is but logical that the same care should be exercised in preventing illness to spread through the parochial schools, that is exercised in the public schools. Then too, it is unfair to give the advantage of the medical service to public school children exclusively, when the parents of parochial school children bear their full burden in maintaining and operating the public schools.

These arguments were felt by members of the Common Council and the service was established and will be effective in a few weeks. It is hoped that it will do much to benefit the children of the parochial schools, but also the disease situation as a whole, insofar as it is affected by the school children of the City.

LIFE EXPECTANCY:

(By GEORGE C. RUHLAND, M. D.)

What have been the results of our life conserving activities? Statistics show that life expectancy at birth at present is about ten times greater than it was twenty-five years ago. The chances for the average individual to grow to middle-aged life, consequently are decidedly better than they used to be. Unfortunately, statistics, however, also show that the adult of forty years or over has actually a shorter expectancy of life than formerly — the decrease amounting to more than a year.

For the registration area, which includes about 70% of the United States, the death rate per thousand at the age period of forty-five to fifty-four has increased by nearly 2% during the last ten years. And at the next older ten year period it has increased by nearly 7% within this space of time.

Investigation further finds that this rather startling state of affairs is by no means universal, but that it is distinctive for the North American continent.

The economic significance of the situation is too grave to be further overlooked. While our success in the saving of child life is, of course, a matter for gratification, we cannot overlook the fact that unless the child grows up to self-sustaining maturity and thus by its labors contributes to the communal assets, its existence creates merely liabilities with no returns upon the investment for its rearing.

The solution of the problem must be sought, however, not in relinquishing our effort in child welfare, but in giving the matter of the shortening of adult life expectancy greater attention.

Why are our chances for reaching three score and ten less than those of our European cousins, or of our own forefathers of a generation ago?

Considerable light is brought upon this perplexing question by the studies of the Society for the Prolongation of Human Life.

In a series of over 2,000 examinations made under the direction of the Society upon young people employed in New York banks and business houses, it was found that nearly 60% suffered from impairment of health to a degree where medical and surgical aid was indicated.

The important factors in connection with this investigation are the preponderance of so-called chronic diseases among those examined, as expressed in degeneration of vital organs, notably the heart and circulatory system, and the kidneys. It is also significant in this connection to bear in mind that these young people, who were of an average age of not more than thirty years, were employed for their apparent fitness for the work which they were doing, and that most of them were not aware that anything was wrong with them.

Obviously the lesson to be learned from these findings is, first, the importance of thorough physical examinations at frequent intervals to determine the condition of health of an individual. Second, the adjustment of our modes of living so that, if it is possible, the development of degenerative or chronic diseases be postponed as long as possible.

Chronic diseases result from neglect of minor ailments; they are practically the sum total of continued irritation, which in itself may not be enough to attract attention. They are largely also the result of wrong habits of living, such as over-eating, hasty eating, insufficient exercise, of worry, the use of stimulants or intoxicants and of so-called social diseases. They are, therefore, to a large extent preventable. Dr. Luther Gulick gives it as his opinion that at least 75% of chronic diseases are avoidable, or at least postponable.

It is well to bring to mind clearly the significance of what this wrong habit of living means for our adult life. At the present time it is conservatively estimated that our annual death rate amounts to about a million and a half, and that about three million people are annually incapacitated through illness. The economic loss, which results from these deaths, many of which occur prematurely, and from the illness which prevents these many people from earning their

own livelihood, is estimated at no less than three billion dollars each year.

Economists are agreed that the vital assets of a nation are worth from four to five times the physical asset of a country. For some time now the national government has been paying increasing attention to the conservation of our natural resources.

Isn't it time, in consideration of this enormous economic waste occasioned through illness and death, that the conservation of human life receive also some consideration? Yet, strange as it may seem, though life and health are prized above all other things, when sickness and death comes nothing has so far been done to obtain recognition in the cabinet of the national government for the lives of humans. Disease among pigs, and poultry, and live stock, very promptly mobilize the entire force of a cabinet officer of the national government. Disease and a decreasing longevity among humans so far has found no recognition on equal terms with the lower animals.

Improvement in this state of affairs must come, however, largely through the individual. A simpler mode of living, life at less high tension, or more intelligent taking stock of one's health as at least an annual undertaking, will go a great way in stemming the tide, which apparently is rising rapidly and threatens to bring an early death to the people of this continent.

PIGS IS PIGS:

Some gifted official of the State Board of Health down in North Carolina, wrote the following:

"Dear Sir:—I don't know what to advise you in regard to your friend C. . . . I know how uncomfortable you must feel to have such an unsuspecting, dangerous person in the office with you, especially if he smokes, coughs and spits on the floor, stove and everything else, as you say, and refuses to have any ventilation whatever. From your description of his cough and other symptoms, I should think

he ought to be in a sanatorium right now where he would learn not only how to take care of himself, but how not to be a menace to others.

"If he were a hog and had hog cholera, of course the State veterinarian would take the very best care of him and he would see to it that he did not in any way endanger the remainder of the herd. If he were a cow and had the foot-and-mouth disease, the federal authorities would be down there in great shape and not only your little town but doubtless your county and perhaps the entire State of North Carolina would be quarantined. Now, of course, since your friend C.... is only a human being and the rest of you are nothing but human beings, I don't see any hope for you. The State Board of Health, of course, would like to see your friend C.... have a thorough physical examination just as we would like very much to have every person in North Carolina have such an examination, and if there is anything wrong with him, to have the defects remedied at once instead of endangering his fellow-men.

"In one of the counties, a few days ago, an epidemic of hog cholera broke out, and had continued four weeks when an indignation mass meeting was held and, as I understand, a county board of health for hogs was instituted who are going to wipe hog cholera out of the county.

"It would, of course, be just as easy to wipe out typhoid fever, tuberculosis, or any of the other contagious diseases, but human beings are human beings, and hogs are hogs."

The above argument is old but remains popular. We all use it. It is a good argument to make when health authorities are pleading for appropriations or legislation to enable them to act. But think it over! Truly, human beings are human beings and hogs are hogs. For instance, when Mr. Hog feels a bad cold coming on he cannot get the solace of booze that the human being seeks. So, not being filled with whisky, Mr. Hog gets over his cold while Mr. Human Being develops pneumonia. Then again, when Mr. Hog shows signs of cholera, or anything else that might become epidemic, he is in no wise consulted about the kind

of treatment he'll get. He is unceremoniously hustled into a pen, is denied the company of his fellow-hogs, is given the kind of food that will do him the most good and gets the kind of veterinary treatment, that will save his life if possible, and that will, before all else, prevent the spreading of his ailment to others of his genus. Now try the same treatment on Mr. Human Being and see what happens. Hogs are hogs and can be handled; human beings are human beings and each knows better than anyone else just what shall be done for him and how far his comfort shall be upset for the benefit of his fellow-men.

Then too, when cholera or other epidemic ailment seizes upon Mr. Hog, the authorities pounce upon him, placard him, nail down the gates, and keep him from mingling with others of his species, with a shot-gun. For Mr. Hog doesn't know the ward alderman, nor the county supervisor, nor the representative in congress, nor the governor's secretary, nor the vice president. Nobody interferes with the officers. But apply the same rigorous quarantine to Mr. Human Being, and what does he do? Alderman, congressman, secretary and vice president are there to intercede in his behalf. He requests special privileges and demands special favors. He expects consideration of his own well being as against the well being of the mass. If quarantine is established he would have it a kind of sublimated, special, safe-and-easy quarantine; a quarantine that would prevent him from attending to irksome work, perhaps, but that would recognize the need for a daily stroll, a visit to the corner grocery, and perhaps, a schooner at the corner saloon.

Turning again to Mr. Hog, — when his case becomes a really serious one, he has nothing to say about it and has merely to yield. Mr. Human Being has everything to say about it and refuses to yield

When all is said and done, Mr. Human Being is responsible for the adequate protection that is accorded Mr. Hog and for the lack of adequate protection accorded human beings. Hogs are hogs. They get what we want them to get. Human beings are human beings. They get what we want them to get.

THE CARE OF TEETH:

(By the United States Public Health Service.)

A recent investigation made by the U. S. Public Health Service in connection with studies of rural school children showed that 49.3 per cent had defective teeth, 21.1 per cent had two or more missing teeth, and only 16.9 per cent had had dental attention. Over 14 per cent never used a tooth brush, 58.2 per cent used one occasionally and only 27.4 per cent used one daily. Defective teeth reduce physical efficiency. Dirty, suppurating, snaggle-toothed mouths are responsible for many cases of heart disease, rheumatism, and other chronic affections. The children are not responsible for the neglected state of their teeth. The ignorant and careless parent is to blame for this condition—a condition which hampers mental and physical growth and puts a permanent handicap on our future citizens. School teachers can and are doing much in inculcating habits of personal cleanliness on the rural school child but this will fail of the highest accomplishment unless parents co-operate heartily and continuously. This is a duty which we owe our children.

“LIVE-LONGER” HINTS:

(From the Pueblo, Colo., Health Dept.)

First. Don't overeat. Too much food clogs the intestines, generates poisons which the body finds difficult if not impossible to throw off, and in general has the same effect on the vitality as banking a furnace would have on a fire.

Second. Don't drink booze; drink pure water instead. Alcohol lowers the mental efficiency, poisons the nerves, impairs the body resistance to infectious disease, and tends to degenerate the arteries. This indictment of alcohol is amply substantiated by scientific researches.

Third. Sleep with your windows open. The lungs throw off carbonic acid gas, which is poisonous. This gas must

be allowed to escape from the bedroom or it will be breathed in again, and thus the body will be poisoned over and over by its own waste products. Moreover, the lungs need the oxygen which is found only in fresh air.

Fourth. Bathe every day, regulating the temperature of the water by the effect which the bath has upon you. Bathing keeps the skin healthy, reduces the number of germs on the body surface, acts as a tonic to the nerves which keeps the blood in circulation throughout the skin. The skin circulation is the chief agent for regulating the body temperature.

Fifth. Always wash your hands before eating. The hands pick up millions of germs between meals, and these will surely get on the food unless they are washed off before you sit down to the table.

Sixth. Keep your mouth in good condition. Poor teeth not only prevent you from chewing your food properly, but also promote a foul, germ-laden condition of the mouth, which will infect all food and thus tell seriously upon the general health.

Seventh. Take a walk every day. Rust attacks unused machinery and sends it to the scrap heap before its time.

Eighth. Don't worry over things you can't help, and see that you don't have to worry over things that you could have helped. Worry brings on neurasthenia, indigestion, and poor nutrition.

Ninth. Leave patent medicines alone. Go to a reliable doctor instead. No man can prescribe a uniform treatment for every given disease or person any more than a tailor can cut a suit of clothes that will fit everybody.

Tenth. Start following these rules young. Any human being's good health begins with his parents. If they bring him into the world healthy, teach him personal hygiene, give him good plain food and sanitary surroundings and keep him away from bad habits till manhood, he is likely to have good health all his life.—J. W. Schereschewsky, M. D., of the U. S. Public Health Service.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

December, 1916.

Annual Death Rate per 1000....	13.12	Population U. S. Census.....	373,857
Annual Birth Rate per 1000....	29.77	Population (Est.) 1915.....	430,000
Annual Death Rate, Males.....	7.7	Annual Death Rate, Females....	5.4
Annual Birth Rate, Males.....	14.9	Annual Birth Rate, Females....	14.8
Death Rate less, Violence.....	12.42	Birth Rate less, Still Born.....	28.9

Deaths recorded	470	Births recorded	1067
Marriages	334		

BIRTHS.

SEX.

Males	535
Females	532

COLOR.

White	1064
Colored	3

REPORTED BY

Physicians	774
Midwives	286
Others	7

NATIVITY OF PARENTS.

Father Mother

Milwaukee	133	169
Wisconsin	279	348
United States	124	111
Germany	124	83
Poland	108	94
Austria	89	91
Bohemia	3	2
Sweden	1	1
Italy	36	36
Roumania	—	—
England	6	6
Holland	2	—
Norway	6	6
Slavonia	2	3
Hungary	39	39
Russia	74	66
Canada	2	1
Greece	11	6
Unknown	18	—
Ocean	—	—
Elsewhere	10	5

BY WARDS.

First	34
Second	39
Third	36
Fourth	21
Fifth	37
Sixth	49
Seventh	27
Eighth	51
Ninth	43
Tenth	29
Eleventh	51
Twelfth	53
Thirteenth	54
Fourteenth	97
Fifteenth	20
Sixteenth	20
Seventeenth	40
Eighteenth	26
Nineteenth	25
Twentieth	45
Twenty-first	42
Twenty-second	32
Twenty-third	32
Twenty-fourth	55
Twenty-fifth	23
Hospitals	92
Pairs of twins	11
Triples	—
Illegitimate	34
Still Born	31

MARRIAGES REGISTERED.

GROOM.

Oldest	69
Youngest	18
Widowed	21
Divorced	16

COLOR.

White	333
Colored	1

NATIVITY.

	Groom	Bride
Milwaukee	3	3
Wisconsin	180	219
United States	62	46
Germany	19	17
Poland	3	3
Austria	12	6
Bohemia	—	—
Sweden	2	1
Italy	13	8
Roumania	2	—

AGE.

GROOM.

Under age	17
21 to 25	120
25 to 35	152
35 to 45	29
45 to 55	13
55 to 65	2
65 to 75	1
Over 75	—

BY WHOM.

By Judges	34
By Justices	26
By Ministers	274

RESIDENCE.

Outside State	32
Outside City	23
Married outside State.....	2

BRIDE.

Oldest	58
Youngest	16
Widowed	22
Divorced	21

COLOR.

White	333
Colored	1

NATIVITY.

	Groom	Bride
England	7	1
Holland	—	—
Norway	3	1
Slavonia	—	—
Hungary	6	7
Russia	17	18
Canada	4	4
Greece	—	—
Elsewhere	1	—
	334	334

AGE.

BRIDE.

Under age	15
18 to 25	201
25 to 35	92
35 to 45	17
45 to 55	7
55 to 65	2
65 to 75	—
Over 75	—

BY WHOM.

By Judges	34
By Justices	26
By Ministers	274

RESIDENCE.

Outside State	21
Outside City	18

COMMUNICABLE DISEASES.

For the month of December, 1916.

	Last Report	New Cases	Died	Recov- ered	On hand
Scarlet Fever	178	248	3	180	243
Diphtheria	70	82	10	112	31
Small Pox	—	2	—	1	1
Measles	17	26	—	35	8
Whooping Cough	76	85	1	53	107
Typhoid Fever	3	10	2	3	8
Chicken Pox	65	168	—	190	43
Meningitis	—	1	4	—	—
Erysipelas	7	18	—	20	5
Total.....	416	640	20	594	446
Tuberculosis	2872	55	31	*11	2892

* 10 died out of city. 1 cause of death not T. B.

Number of fumigations	3
Cubic feet fumigated	21,000
Fumigators used	21

FERD. MACK, JR.,
Assistant Chief Inspector.

WORK DONE BY SANITARY INSPECTORS.

No. of orders served.....	1591	No. houses disinfected	291
No. of complaints received.....	1660	No. calls by ambulance.....	64
No. of inspections made.....	6624	No. visits to schools.....	84
No. of cultures del. and col.....	177	No. funerals attended	11
No. visits to quarant. houses....	537	No. arrests	5
houses placarded	202		

DR. T. F. THOMSON,
Chief Sanitary Inspector.

DEATHS.

According to Cause, Annual Rate per 1000, and Deaths in Public Institutions.

Months.....	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Total Deaths.....	541	521	523	565	534	495	367	458	375	403	419	395	470
Annual Death Rate.....	15.64	14.55	14.59	15.76	14.88	13.82	10.24	12.78	10.46	11.24	11.69	11.02	13.12
Typhoid Fever.....	1	2	10	21	7	4	4	3	1	5	3	2	2
Measles.....	3	10	22	35	24	7	1	1	0	0	0	1	0
Scarlet Fever.....	3	2	3	5	9	5	4	4	0	1	3	2	3
Whooping Cough.....	7	7	4	2	2	2	0	2	1	6	2	1	1
Diphtheria.....	17	6	3	6	9	7	3	3	0	6	11	9	10
Influenza.....	16	21	6	4	0	1	0	1	1	0	0	2	1
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Phthisis.....	31	28	26	39	29	31	36	30	16	19	22	22	31
Cancer.....	23	26	26	22	26	31	34	45	34	28	41	33	28
Meningitis.....	3	12	8	5	6	10	6	3	7	3	1	4	4
Apoplexy.....	23	25	23	22	30	31	18	19	16	18	34	24	22
Org. Heart Disease.....	40	30	30	34	49	35	32	35	25	32	40	34	42
Bronchitis.....	17	18	13	16	16	21	13	8	5	4	8	5	16
Pneumonia.....	124	106	88	103	98	86	30	19	27	21	37	33	78
Diarrhoea—Under 2.....	19	17	46	15	16	12	8	13	36	51	16	14	17
Nephritis.....	24	27	24	25	19	28	25	30	24	22	28	27	32
Congenital Debility.....	23	29	41	49	37	27	23	30	24	31	16	35	31
Senility.....	12	13	15	12	8	10	9	10	6	6	6	9	5
Violence.....	27	26	21	17	23	31	25	93	40	24	22	28	25
Suicides.....	5	5	3	5	6	3	8	9	3	7	7	9	4
Homicides.....	0	1	0	0	1	3	1	0	0	1	0	0	1
Under 30 days.....	30	42	43	62	48	39	34	44	36	40	42	51	62
Bet. 30 days and 1 year.....	40	54	116	77	83	72	26	35	55	68	37	31	29
Bet. 1 and 5 years.....	58	52	53	83	78	49	26	25	30	35	31	18	35
5 to 60 years.....	219	187	180	218	187	211	171	217	162	147	167	169	212
Over 60 years.....	192	186	131	125	138	124	110	137	92	113	142	126	132
Age at death—all ages.....	41.4	41.4	31.3	30.8	32.	34.6	39.5	40.9	35.2	35.4	40.6	40.6	38.
Age at death—over 5.....	53.9	57.1	53.	50.5	52.4	50.5	51.6	52.5	51.	53.5	55.	52.8	51.8
Public institutions.....	86	92	107	81	71	117	78	108	89	57	85	106	107

ORDINANCES YOU SHOULD KNOW

PARTS OF THE PASTEURIZATION ORDINANCE:

Section 787.5. All milk hereafter sold in the City of Milwaukee, except certified milk and inspected milk, shall be pasteurized by either the holding or the flash system. The degree of heat reached in either process and the length of time the milk is held at that temperature in either process shall be recorded by an automatic heat recording device and the pasteurizing apparatus and recording device used shall in either case be approved by and be under the control of the Commissioner of Health.

Section 787.6. All milk pasteurized in accordance with the provisions of Section 787.5 by the holding system shall be heated to a temperature of not less than one hundred forty-five degrees Fahrenheit and shall be continuously held at that temperature for thirty minutes and shall then be promptly and quickly cooled to a temperature not exceeding fifty degrees Fahrenheit. All milk pasteurized in accordance with the provisions of Section 787.5 by the flash system shall be brought to a temperature of one hundred sixty-five degrees Fahrenheit and held at that temperature for one and one-half minutes and shall then be promptly and quickly cooled to a temperature not exceeding fifty degrees Fahrenheit.

DEMAND MILK FROM **Tuberculin Tested Cows!**

Consumption in cattle is catching.

*You may be "drinking it" with
your milk.*

It is stupidity to expose your children to the diseases of dairy animals.

Don't do it! Compel your dealer to guarantee that the product he leaves at your door each morning is free from tuberculosis.

The tuberculin test is the guarantee!

ASK FOR

"Pasteurized Milk from Tested Cows"

THE SAFEST MARKET MILK!

Pasteurization, properly done, safeguards milk against other diseases. It is an excellent additional precaution but must not be considered an adequate substitute for the Tuberculin Test.

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Bulletin

of the

UNIVERSITY OF ILLINOIS LIBRARY

Health Department

FEBRUARY, 1917.

Vol. 7, No. 2.

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CITY OF MILWAUKEE

Published Under the Direction

of

GEORGE C. RUHLAND, M. D.

Commissioner of Health
of the
City of Milwaukee.

F. W. LUENING,
Deputy Commissioner,
Editor.

LEOPOLD SCHILLER, M. D., Asst. to Commissioner.

E. T. LOBEDAN, M. D., Asst. to Commissioner.

GEORGE R. ERNST, M. D., Supt. of Tuberculosis.

E. V. BRUMBAUGH, M. D., Bacteriologist.

RUSSELL W. CUNLIFFE, City Chemist.

GEORGE E. ADAMS, Registrar of Vital Statistics.

F. T. THOMSON, M. D., Chief Sanitary Inspector.

H. H. BRYANT, D. V. S., Chief Meat Inspector.

STANLEY S. PILGRIM, M. D. C., Asst. Chief Meat Inspector.

FERD. MACK, Division of Contagious Diseases.

Bulletin of the Health Department

FEBRUARY 1917

It is regrettable but very necessary that the Health department repeat its already oft-sounded warning, "Boil the Water."

Department analyses show that the water is seriously contaminated. There are times when this contamination is greater than at other times, but it nevertheless is a fact that the city's source of drinking water supply is polluted. Especially noticeable is this fact when there have been storms, and particularly when the prevailing winds have been from the east and southeast.

Boiling the water is the one certain safeguard that every Milwaukeean can avail himself of and that will insure safety regardless of pollution. Boiling means boiling for ten, fifteen or twenty minutes and, if it is necessary to restore the taste thereafter, this can be accomplished by pouring the water from one vessel into another.

The city attempts to render the water safe by adding chlorine, but absolute sterility cannot be secured even though comparatively large quantities of chlorine are used, and, therefore, the additional precaution of boiling is needed.

Could the Health department be certain that every Milwaukeean would boil all of the water that were used by him, it would not be necessary to continue the chlorine treatment, but since too many persons will take the water in its raw state, there is the ever present danger of typhoid unless treatment is provided at the intake pipes.

When the water is not excessively cold, comparative safety is assured by the application of chlorine. When the water is excessively cold, the chlorine does not act as quickly upon and some bacteria colonies "get by."

It is for this reason that the department urges so repeatedly, "Boil the Water."

PATENT MEDICINES

CERTAIN ADVERTISEMENTS:

During the past few months, the Health Department has clipped patent medicine advertisements from the Milwaukee newspapers, partially to gauge the extent of advertising revenues from this source and, partially, to follow up assertions made in the advertisements with a view to prosecution. In two days, the following were among those who proclaimed their merits through the columns of Milwaukee's papers.

PERUNA:

Peruna, that cure for colds and catarrh — that one time world popular bracer — continues to appear in eight inch double column in the papers of the city. It is said that it by no means is the same old reliable Peruna, for, according to the American Medical Association, where Peruna was sold by the carload lots some six years ago, it now is sold by the case. In 1906, the Peruna Company was notified that it either must put some medicine in its booze or it could be sold only in saloons or other places carrying liquor licenses.

The great objection to following this suggestion was, that, if any appreciable quantity of drugs was added to Peruna, it would spoil that famous Peruna flavor that was resulting in its consumption by the barrel.

However, the Peruna Company finally was compelled to add something and it selected a laxative. The results, naturally, were sad. Those who were taking their morning nip and midday toddy in the form of the good, old-style Peruna failed to get their usual stimulation and did not entirely approve of the results they did get.

So the sale of Peruna diminished enormously. However, it still appears in Milwaukee as a remedy for colds

and catarrh with its "great weight of testimony that has accumulated in the forty-four years that Peruna has been on the market."

As for this testimony, naturally, those who could not well enter the corner saloon and who, because of neighborhood modesty could not allow the beer wagon to stop before the house or have the distiller's jug delivered at the front door, were eminently grateful to the Peruna Company for putting up its stimulants in so respectable a form as the Peruna bottle. Why should they not write tons of testimonials?

As for the modern Peruna, it is advertised as an honest medicine and a family safeguard. and, it is pointed out, that "family safety is in danger without Peruna."

LIMESTONE PHOSPHATE:

Among other alert manufacturers are those who are selling "limestone phosphate" and who conceal this purpose in half columns on the merits of hot water taken regularly each morning. As a matter of fact, there can be no particular objection to the limestone phosphate advertisements for the reason that a glass of water, either hot or cold — depending upon the individual taking it — generally is believed to be beneficial. As for the addition of limestone phosphate — it would be better to use the water alone unless a physician prescribed the limestone phosphate.

STUART'S CALCIUM WAFERS:

Among those also present in the Milwaukee papers is the F. A. Stuart Company and the Stuart's Calcium Wafers. We are assured that the wafers "will remove every blemish that may appear upon the skin," and we are told that the fashions of the day actually demand the wafers, to wit:

"All styles of dress, this year, make it necessary that every woman remove pimples, blotches, etc. This condition

is brought about by reason of the fact that the colors used and the style of hair dress throw the face in a position of prominence that will make pimples, etc., very hideous if they exist."

CREME TOKALON ROSEATED:

Similar to the Stuart Company's effort is that of the manufacturers of Creme Tokalon Roseated, who, in an eight inch double column advertisement, tell the tale of a French countess who for the past seventy years has, apparently, lived largely upon their complexion cream. At seventy, she is as fair as the proverbial rose, with never a wrinkle to proclaim her age.

SWAMP ROOT:

Milwaukee also continues to be told of the unrivaled merits of Swamp Root. The American Medical Association tersely terms Swamp Root a "worthless fraud."

Swamp Root is advertised as a kidney medicine, but before the Food and Drugs Act compelled changes, it was advertised as a kidney "cure." Infact, the same "remedy," as sold on the markets of Great Britain and America, is sold under different labels, apparently because in America a law now requires at least an approximation of truth in statements concerning patent medicines.

AN ECZEMA CURE:

Side by side with Swamp Root appears the advertisement of one J. C. Hutzell, a Fort Wayne druggist, who, for a small stipend, agrees to cure Eczema. The Pyramid Drug Company, Marshall, Mich., also appears in Milwaukee newspaper columns with a cure for Piles.

Then there is the Blackburn Products Company of Dayton, Ohio, who are induced to explain the secret of their wonderful concoction, Mentho-Laxene — also a remedy for

coughs, colds, catarrh, etc. They tell us that it is a compound of wild cherry, Tolu, Cascara, Grindelia, Mentho Ammonium Chloride and "alcohol sufficient to preserve and keep in solution."

All this, of course, is highly elucidating but means nothing to the average reader without chemical knowledge. However, it may induce some persons to buy the remedy because of the apparent sincerity of its manufacturers. There is more than one way to offset the inconvenience of a Food and Drug law.

AND THEN—SANITONE WAFERS:

Then, too, Milwaukee papers are regularly utilized by our old friend Kellogg and his Sanitone Wafers. An elderly clerical gentleman is depicted hurdling over a six foot fence, his enthusiasm for thus traveling about from place to place having been induced by the generous use of the wafers.

Milwaukeeans are asked to send for a fifty cent trial box of the wonderful discovery and, for that, enclose six cents in stamps. Whether the Kellogg scheme remains the same that prevailed a few years ago is not known. At that time, the trial package was duly sent. It consisted of a small box in which were a few orange colored tablets, but by the same mail, there came a larger box "containing a complete 30 day treatment" for which \$5.00 was asked. This was followed by a bombardment of letters urging that the money be sent for the treatment. The first two letters asked \$5.00; the third and fourth offered to accept \$3.50; in the fifth and sixth, only \$2.50 was required to settle the account.

A NEW FLY CATCHER:

A clerk in a Chicago store has discovered that an ordinary vacuum cleaner is the best sort of fly catcher. A skillful use of the nozzle of the cleaner will gather up the flies better than any sort of trap or swatter.

FOOD:

(From "How to Live". By IRVING FISCHER and EUGENE LYMAN FISK, M.D.)

A common error of diet consists in using too much protein. Instead of 10 calories out of every 100, many people in America use something like 20 to 30. That is, they use more than double what is known to be ample. This excessive proportion of protein is usually due to the extensive use of meat and eggs, although precisely the same dietetic error is sometimes committed by the excessive use of other high-protein foods, such as fish, shell-fish, fowl, cheese, peas and beans, or even, in exceptional cases, by the use of foods less high in protein when combined with the absence of any foods very low in protein.

Professor Rubner of Berlin, said:

"It is a fact that the diet of the well-to-do is not in itself physiologically justified; it is not even healthful. For, on account of false notions of the strengthening effect of meat, too much meat is used by young and old, and by children, and this is harmful. But this meat is publicly sanctioned; it is found in all hotels; it has become international and has supplanted, almost everywhere, the characteristic local culinary art. It has also been adopted in countries where the European culinary art was unknown. Long ago the medical profession started an opposition to the exaggerated meat diet, long before the vegetarian propaganda was started. It was maintained that flour foods, vegetables, and fruit should be eaten in place of the overlarge quantities of meat."

When protein is taken in great excess of the body's needs, added work is given the liver and kidneys, and their "factor of safety" may be exceeded.

Flesh food — fish, shell-fish, meat, fowl — tend to produce an excess of acids, are very prone to putrefaction, and contain "purins" which lead to the production of uric acid. This is especially true of sweetbreads, liver and kidneys. Some of the vegetable foods, such as peas and beans, rich in protein, are likewise not free from objection. Their pro-

tein is not always easily digested and is, therefore, likewise liable to putrefaction. These foods are, however, rich in iron, which renders them a more valuable source of protein for children and anemic people than meat. Also, an excess of protein is not likely to be derived from such bulky foods as from meat, which is a concentrated form of protein.

Additional to protein, the remainder of the diet — say 90 per cent of the calories — may be divided according to personal preference between fats and carbohydrates in almost any proportion, provided some amount of each is used. A good proportion is 30 per cent fat and 60 per cent carbohydrate.

Hard foods — that is, foods that resist the pressure of the teeth, like crusts, toast, hard biscuits or crackers, hard fruits, fibrous vegetables, and nuts, are an extremely important feature of a hygienic diet. Hard foods require chewing. This exercises and so preserves the teeth, and insures the flow of saliva and gastric juice. If the food is not only hard, but also dry, it still further invites the flow of saliva. Stale and crusty bread is preferable to soft fresh bread and rolls on which so many people insist. The Igorots of the Philippines have perfect teeth so long as they live on hard, coarse foods. But civilization ruins their teeth when they change to our soft diet.

Most of the ordinary foods lack bulk; they are too concentrated. For this purpose, it is found that we need daily, at the very least, an ounce of cellulose, or "woody fiber." This is contained in large measure in fibrous fruits and vegetables — lettuce, celery, spinach, asparagus, cabbage, cauliflower, corn, beets, onions, parsnips, squash, pumpkins, tomatoes, cucumbers, berries, etc.

Until recently, would-be food reformers have made the mistake of seeking to secure concentrated dietaries, especially for army rations. It was this tendency that caused Kipling to say, "compressed vegetables and meat biscuits may be nourishing, but what Tommy Atkins needs is bulk in his inside."

THE SCARLET FEVER SITUATION:

(By GEORGE C. RUHLAND, M. D. Commissioner of Health.)

All "Colds" are Dangerous.

Call a Physician early.

Report all Cases Promptly.

Observe Quarantine; it is your protection.

With the increasing prevalence of scarlet fever in our city, the Health Department feels more strongly than ever the need for public co-operation for the control of the situation.

While the number of reported cases is only 353 at present, the actual number undoubtedly is much greater since many cases apparently are not recognized and, therefore, not reported until discovered by the department officials in tracing contact cases.

Scarlet fever is essentially a disease of childhood, being much less frequent after the tenth year of life. The disease is spread largely through the secretion and discharges from nose, throat and ears of the patients.

The contagiousness of the patient is most marked during the time of the scarlet red eruption of the skin from which the disease takes its name, but may, and usually does, continue for from four to six weeks.

The contagiousness of the patient is not at all dependent upon the severity of the case. A patient may have been sick but very slightly, and in fact feel quite himself again, and yet be the cause of serious infection to others.

It is the comparative mildness of the disease at present that is essentially responsible for the spread of the fever.

Parents do not regard the illness of their child as serious, and consequently fail to call in a physician. After a comparatively brief absence the child consequently returns to school in a highly contagious and dangerous condition for the rest of the children with whom he comes into contact.

This means a serious wrong to others and is an unwarranted risk for the child that has had the disease. It should be well understood that scarlet fever, unfortunately, frequently is complicated by other troubles. Of this, ear

trouble, which may lead to permanent or complete destruction of the sense of hearing, is one; and inflammation of the kidneys and the heart, which may mean chronic invalidism and a shortened life, are others.

Every case, therefore, should have the careful attention of a competent physician before it is considered safe.

While it is true that scarlet fever usually begins rather abruptly with sore throat, vomiting, high fever, and in twenty-four hours the development of the characteristic rash, these symptoms are by no means always present. In mild cases even the best of physicians may be kept in doubt for a time.

Parents will do best, therefore, by their own child, as well as for others, if they will remember that every "cold" with "sore throat" in a child needs attention, and that the trained physician is best qualified to give the proper attention. "Safety first" in these cases also means economy and no regrets later.

The present outbreak of scarlet fever will progress or be checked in proportion as the public is willing to co-operate by reporting all cases, and even only suspicious cases, to the Health Department.

THE EFFECT OF COLD:

The extremely cold weather naturally suggests a discussion of the effect of exposure of the body to low temperatures.

The most common of these effects is the condition known as "chapping" of the skin — most commonly observed on the hands. While in this condition — as in all conditions — individual predisposition plays a part, it nevertheless occurs most frequently in those who are careless in exposing their hands to the cold when they are moist. The best way, therefore, to avoid the condition, is to carefully dry the hands after washing. Those who are naturally predisposed will do well to use some oily preparation on their hands and skin surfaces after washing or before exposing them to the cold air.

The severer forms of chapping, in which cracking of the skin occurs with bleeding, may run into eczematous condition and need the attention of a physician or skin specialist.

Chilblains are also fairly frequent at this time of the year. They occur, essentially, in the young and the old, or in those in whom the circulation is enfeebled. The extremities of the body, the feet and hands, and occasionally the cheeks are the usual site for the development of chilblains. The effected area usually is reddish or purplish and is cold to touch although a sensation of burning is usually complained of. Usually this burning or itching is intensified as the affected part is exposed to artificial heat.

The best preventive is to maintain a healthy circulation. For those of enfeebled health, there should be massages of the extremities — particularly the feet. See to it that the circulation is stimulated. Once chilblains have developed, the treatment is best handled by a competent physician.

In the simpler cases, dusting with boric acid and protecting the parts with cotton may suffice.

A still more intense effect of cold, expressed in frost bite and freezing of tissues, usually shows the affected part of waxy, whitish and somewhat shrunken appearance. The patient may not be conscious of the fact that he has been frost bitten and the diagnosis is more often made by someone else, who may see the frozen part. As soon as the patient enters a warm room and the tissues begin to thaw, intense pain is associated with the process. The thawing process, therefore, should be undertaken carefully and gradually, and the use of snow in rubbing the affected part or the use of cold water is an admirable means of gradually stimulating the circulation. If the freezing has been at all severe, there usually will follow destruction and sloughing of the dead tissue. Such cases require the attention of a physician.

To prevent the occurrence, it is best, when exposed cold, to occasionally rub the exposed parts to make certain that circulation is maintained in them,

THE EFFECT OF DRAFTS:

This letter was received by the Health Department recently:

“Gentlemen:—

“As a former resident of Milwaukee, I turn to you for information regarding a matter which is of vital importance to me at the present moment.

“In reviewing the School Physiology with one of my children, I was impressed with certain isolated assertions which may be summarized as follows:

“Open windows will cause draughts.

“Draughts will cause colds.

“Colds may be the cause of Consumption.

“I therefore request that your honorable body answer me the following questions.

“1. Is it true or is it not true that open windows will, or may cause draughts?

“2. It is true or is it not true that draughts will, or may cause colds?

“3. Is it true or is it not true that colds may be the cause of consumption?

“4. Are draughts harmful in certain climates and harmless in others?

“5. Are draughts harmful in certain temperatures and harmless in others?

“6. What are the best means of preventing draughts?”

Since the question of drafts, home ventilation and outdoor air is one that has become of universal interest, the answer to the letter is printed in full:

“We have received your letter of January 24th and, since the ventilation of homes and the utilization of fresh air has become a matter of study in all Health Departments, we are more than interested.

“Taking your question in the abstract, we are compelled to answer Nos. 1 and 2 affirmatively. That is, using your words:

“1. Open windows will or may cause drafts.

“2. Drafts may cause colds.

“As for your questions 3, 4, 5 and 6:

“3. Colds do not cause consumption.

“4. Insofar as drafts are at all harmful, they may have a greater effect where the humidity is high, since excessive and, sometimes, cold moisture is moved in the drafts.

“5. We do not believe that temperature would make them either more or less harmful.

“6. As for preventing drafts, there are window ventilators that can be used to prevent direct drafts, and we presume that is what you mean.

“However, having answered these questions, we hasten to qualify the answers somewhat, as follows:

“While it is true that open windows may and will cause drafts, it is by no means true that drafts — which are air in motion — are ordinarily harmful. In fact, it is, undoubtedly, better to have drafts than to have foul air in the rooms we live in. While it, also, is true that drafts may cause colds, it is a fact that they will not cause colds once we have become accustomed to fresh air in motion. In fact, as you undoubtedly know, nothing is more conducive to tuberculosis than constant residence in homes that are unventilated and, therefore, free from drafts. As for colds, one of the best means of preventing them is to breathe fresh air, even though it be air in motion, or drafts.

On this subject, Irving Fisher of Yale University, and Eugene Lyman Fisk, M. D., also of the Yale University, in their book on “How to Live,” say:

““Air is the first necessity of life. Living and working rooms should be ventilated. The most important features of ventilation are motion, coolness and the proper degree of humidity and freshness. There is an unreasonable prejudice against air in motion. The gentle draft is, as a matter of fact, one of the best friends which the seeker after health can have. Of course, a strong draft directed against some exposed part of the body, causing a local chill for a prolonged time, is not desirable; but a gentler draft, such as ordinarily occurs in good ventilation, is extremely wholesome.

“ ‘It goes without saying that persons unaccustomed to ventilation and, consequently, oversensitive to drafts, should avoid overexposure, while they are in process of changing their habits. But, after even a few days of enjoyment of air in motion, with cautious exposure to it, the likelihood of colds is greatly diminished; and persons who continue to make friends with moving air soon become immune to colds.

“ ‘The popular idea that colds are derived from drafts is greatly exaggerated. It is exposure to draft plus the presence of germs and a lowered resistance of the body, which produces the usual cold. Army men have often noted that as long as they are on the march and sleep outdoors, they seldom or never have colds. Of course, it is never advisable that persons in a perspiration should sit in a strong draft. The best ventilation is usually to be had through the windows. We advise keeping the windows open almost always in summer, and often in winter. One should have a cross current of fresh air and an exit for used air at opposite sides of the room.’ ”

“It is perfectly clear that these authorities are directly advocating a draft through the room and are not contending that drafts are in any sense dangerous to those who will accustom themselves to them.

“In the Tuberculosis Sanatoria operated by this department patients sleep on porches, and the fresh air is a factor in the cure of tuberculosis. The temperature conditions make no difference, and the same amount of ventilation is used when the thermometer is at 20 below zero as is used when it is 90 in the shade.

“Summarizing, then, while the statements in the School Physiology that you mention are not all incorrect, in the abstract, they are decidedly misleading if they are so placed as to indicate that the drafts, caused by open windows, are bad, and that these drafts are the cause of colds.

“The assertion that colds may cause consumption cannot be substantiated. The germs causing colds, and those causing tuberculosis, are in no wise related. Predisposition to colds may precede consumption or, more probably, colds

are being frequently contracted because the individual attacked already has consumption, although the disease may not be recognized. Lowered vitality and consequent susceptibility to an attack of germ disease, also, may cause colds since the broad cause of all germ diseases is found in poor bodily resistance. To guard against it, the bodily resistance should be built up and to help do this, fresh air should be breathed as constantly as possible. And that usually means air in motion and thus, at least, some draft in the home.

SOME WAR STATISTICS:

The City of Toronto offers the following on the war situation from a public health viewpoint:

The most appalling factor of the present international struggle is the awful sacrifice of human life. There have been practically 4,000,000 fatal casualties on all sides in the two and a quarter years since the outbreak of war, and probably a million other persons have been more or less permanently disabled. On the other hand, in the various nations engaged in this conflict, approximately 4,600,000 die every year in times of peace from preventable diseases. To these might be added another million who have survived the contest with these various disease germs, but who have been more or less disabled for life as a consequence of their sickness.

In other words, we are engaged in a death struggle with the various disease-producing germs—these invisible armies—every year, every day, every hour, but there is nothing spectacular, nothing particularly tragic about it, as there is on the firing line. The contest is carried on quietly in the home, between the patient and the doctor on the one hand and the germs of disease on the other. Once out of every ten times the germs win out and the patient dies. There are no Press comments, but it is a human life just the same; a life that means as much to the home and to the nation as if it had been taken by the explosion of one of the enemies' shells. Furthermore, the victim is deprived of the honor and glory of having died fighting for his country.

The question is frequently asked: "How will the nations be repopulated after the present war?" A comparison of the mortality from all causes in the Canadian Expeditionary Forces since the outbreak of war with the mortality from Typhoid Fever and Tuberculosis alone in Canada in the same period, will throw some light on a possible means by which the population can be restored.

Deaths from Typhoid Fever and Tuberculosis in Canada since the outbreak of war, two and a quarter years, have been17,350

Deaths from all causes in the Canadian Expeditionary Forces since the outbreak of war, two and a quarter years, have been15,766

Therefore, there were 1,584 more deaths from Typhoid and Tuberculosis in Canada than have occurred among the Canadian soldiers from all causes during the same period. It is worthy of note here that these two diseases attack our race, for the most part, during the most productive period of life. Again, if we take the following group of preventable diseases — Typhoid Fever, Diphtheria, Scarlet Fever, Whooping Cough, Tuberculosis and Measles, to say nothing of our preventable infant mortality and the mortality from the preventable industrial diseases of middle life—the comparison is even more striking:

The deaths from this group of preventable diseases in Canada since the outbreak of war have been.....22,560

The fatal casualties in the Canadian Expeditionary Forces in the same period.....15,766

The excess of deaths from these preventable diseases over the fatal causes amongst our soldiers since the outbreak of war, therefore, has been 6,794. It must be obvious then that if we put forth more strenuous efforts in the Dominion and throughout the Empire to prevent this appalling, unnecessary sacrifice of human life from preventable diseases, the Empire will soon be repopulated.

VENTILATION REQUIREMENTS:

A Committee on Ventilation appointed by the city of Chicago has found that 40 to 75 per cent is the proper relative humidity for air indoors. About 64° F., with a humidity of 55 per cent, is indicated as the "comfort zone." With a lower humidity than this the temperature should be 70° F. Economy in heating rests in maintaining a humidity and temperature approximating the "comfort zone." The humidity required may be obtained by using free steam or water sprays in the air intake.

DO YOU KNOW THAT

A little cough often ends in a large coffin?

* * *

Bodily vigor protects against colds?

* * *

Careless sneezing, coughing spitting spreads colds?

* * *

Open air exercise cures colds?

* * *

Colds sometimes get well in spite of the excessive use of alcoholic beverages?

* * *

Overheated, air-tight rooms beget colds?

* * *

Neglected colds often forerun pneumonia?

* * *

Persistent, oft repeated colds, indicate bodily weakness?

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

January, 1917.

Annual Death Rate per 1000...	14.56	Population U. S. Census.....	373,857
Annual Birth Rate per 1000....	22.22	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	8.2	Annual Death Rate, Females....	6.2
Annual Birth Rate, Males.....	11.3	Annual Birth Rate, Females.....	10.9
Death Rate less, Violence.....	13.8	Birth Rate less, Still Born.....	21.4

Deaths recorded	534	Births recorded	815
Marriages	238		

BIRTHS.

SEX.		BY WARDS.	
Males	415	First	29
Females	400	Second	32
		Third	32
		Fourth	16
		Fifth	37
		Sixth	27
		Seventh	23
		Eighth	33
		Ninth	41
		Tenth	13
		Eleventh	46
		Twelfth	39
		Thirteenth	33
		Fourteenth	52
		Fifteenth	13
		Sixteenth	14
		Seventeenth	31
		Eighteenth	17
		Nineteenth	28
		Twentieth	52
		Twenty-first	37
		Twenty-second	25
		Twenty-third	24
		Twenty-fourth	30
		Twenty-fifth	25
		Hospitals	66
		Pairs of twins	7
		Triplets	—
		Illegitimate	14
		Still Born	22

COLOR.	
White	809
Colored	6

REPORTED BY	
Physicians	578
Midwives	229
Others	8

NATIVITY OF PARENTS.		
Father	Mother	
Milwaukee	99	116
Wisconsin	230	274
United States	99	97
Germany	90	74
Poland	76	60
Austria	52	55
Bohemia	9	7
Sweden	2	—
Italy	31	30
Roumania	2	1
England	3	5
Holland	—	—
Norway	3	2
Slavonia	4	3
Hungary	29	30
Russia	55	39
Canada	3	1
Quebec	9	7
Unknown	10	—
Ocean	—	1
Elsewhere	9	13

MARRIAGES REGISTERED.

GROOM.		BRIDE.	
Oldest	66	Oldest	59
Youngest	19	Youngest	15
Widowed	17	Widowed	21
Divorced	11	Divorced	7

COLOR.		COLOR.	
White	238	White	237
Colored	—	Colored	1

NATIVITY.			NATIVITY.		
	Groom	Bride		Groom	Bride
Milwaukee	31	39	England	1	—
Wisconsin	82	99	Holland	—	—
United States	35	27	Norway	—	—
Germany	8	11	Slavonia	—	—
Poland	22	14	Hungary	12	10
Austria	11	15	Russia	23	21
Bohemia	—	—	Canada	2	—
Sweden	1	—	Greece	—	—
Italy	6	1	Elsewhere	3	1
Roumania	1	—			
				238	238

AGE.		AGE.	
GROOM.		BRIDE.	
Under age	6	Under age	13
21 to 25	101	18 to 25	156
25 to 35	93	25 to 35	43
35 to 45	22	35 to 45	15
45 to 55	11	45 to 55	8
55 to 65	3	55 to 65	3
65 to 75	2	65 to 75	—
Over 75	—	Over 75	—

BY WHOM.		BY WHOM.	
By Judges	28	By Judges	28
By Justices	16	By Justices	16
By Ministers	194	By Ministers	194

RESIDENCE.		RESIDENCE.	
Outside State	12	Outside State	13
Outside City	21	Outside City	13
Married outside State.....	4		

COMMUNICABLE DISEASES.

For the month of January, 1917.

	Last Report	New Cases	Died	Recov- ered	On hand
Scarlet Fever	243	396	4	222	413
Diphtheria	31	116	15	83	49
Small Pox	1	3	—	4	—
Measles	8	44	1	40	11
Whooping Cough	107	98	2	86	118
Typhoid Fever	8	4	1	7	4
Chicken Pox	43	197	—	185	55
Meningitis	—	2	2	—	—
Erysipelas	5	22	1	10	16
Total.....	446	883	26	637	666
Tuberculosis	2892	75	27	13	2927

* 6 died out of city. 2 cause of death not T. B. 2 no case.

Number of fumigations	6
Cubic feet fumigated	25,000
Fumigators used	25

FERD. MACK, JR.,
Assistant Chief Inspector.

WORK DONE BY SANITARY INSPECTORS.

No. of orders served.....	2186	No. houses disinfected	369
No. of complaints received.....	2099	No. calls by ambulance.....	96
No. of inspections made.....	5872	No. visits to schools.....	108
No. of cultures del. and col....	208	No. funerals attended	14
No. visits to quarant. houses....	1146	No. arrests	4
No. houses placarded	439		

DR. T. F. THOMSON,
Chief Sanitary Inspector.

DEATHS.

According to Cause, Annual Rate per 1000, and Deaths in Public Institutions.

Months.....	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.
Total Deaths.....	521	523	565	534	495	367	458	375	403	419	395	470	534
Annual Death Rate.....	14.55	14.59	15.76	14.88	13.82	10.24	12.78	10.46	11.24	11.69	11.02	13.12	14.56
Typhoid Fever.....	2	10	21	7	4	4	3	1	5	3	2	2	1
Measles.....	10	22	35	24	7	1	1	0	0	0	1	0	2
Scarlet Fever.....	2	3	5	9	5	4	4	0	1	3	2	3	4
Whooping Cough.....	7	4	2	2	2	0	2	1	6	2	1	1	2
Diphtheria.....	6	3	6	9	7	3	3	0	6	11	9	10	15
Influenza.....	21	6	4	0	1	0	1	1	0	0	2	1	2
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Phthisis.....	28	26	39	29	31	36	30	16	19	22	22	31	28
Cancer.....	26	26	22	26	31	34	45	34	28	41	33	28	31
Meningitis.....	12	8	5	6	10	6	3	7	3	1	4	4	5
Apoplexy.....	25	23	22	30	31	18	19	16	18	34	24	22	20
Org. Heart Disease.....	30	30	34	49	35	32	35	25	32	40	34	42	44
Bronchitis.....	18	13	16	16	21	13	8	5	4	8	5	16	16
Pneumonia.....	106	88	103	98	86	30	19	27	21	37	33	78	117
Diarrhoea.....	17	46	15	16	12	8	13	36	51	16	14	17	14
Nephritis.....	27	24	25	19	28	25	20	24	22	28	27	32	34
Congenital Debility.....	29	41	49	37	27	23	30	24	31	16	35	31	28
Senility.....	13	15	12	8	10	9	10	6	6	6	9	5	16
Violence.....	26	21	17	23	31	25	93	40	24	22	28	25	28
Suicides.....	5	3	5	6	3	8	9	3	7	7	9	4	7
Homicides.....	1	0	0	1	3	1	0	0	1	0	0	1	3
Under 30 days.....	42	43	62	48	39	34	44	36	40	42	51	62	51
Bet. 30 days and 1 year.....	54	116	77	83	72	26	35	55	68	37	31	29	52
Bet. 1 and 5 years.....	52	53	83	78	49	26	25	30	35	31	18	35	35
5 to 60 years.....	187	180	218	187	211	171	217	162	147	167	169	212	223
Over 60 years.....	186	131	125	138	124	110	137	92	113	142	126	132	173
Age at death—all ages.....	41.4	31.3	30.8	32.	34.6	39.5	40.9	35.2	35.4	40.6	40.6	38.	41.2
Age at death—over 5.....	57.1	53.	50.5	52.4	50.5	51.6	52.5	51.	53.5	55.	52.8	51.8	55.5
Public Institutions.....	92	107	81	71	117	78	108	89	57	85	106	107	108

ORDINANCES YOU SHOULD KNOW

*EMPOWERING THE COMMISSIONER OF HEALTH
TO INSPECT BUILDINGS, LOTS AND PLACES
WITHIN THE CITY OF MILWAUKEE:*

Section 1. The Commissioner of Health and any person acting under him are hereby authorized to enter into and examine at any time all buildings, lots and places of all descriptions within the City of Milwaukee, for the purpose of ascertaining the condition thereof so far as the public health may be affected thereby, and it shall be the duty of said Commissioner of Health to enter and examine, or cause to be entered and examined, all such buildings, lots and places for the purpose of ascertaining the condition thereof so far as public health may be affected thereby, whenever in his judgment he shall deem it necessary, and any person, firm or corporation who shall, either by himself or agent, prevent or hinder the Commissioner of Health or any one acting under him, from carrying out the provisions of this ordinance shall be subject to a fine of not less than ten dollars (\$10.00) nor more than one hundred dollars (100.00).

DEMAND MILK FROM Tuberculin Tested Cows!

Consumption in cattle is catching.

*You may be "drinking it" with
your milk.*

It is stupidity to expose your children to the diseases of dairy animals.

Don't do it! Compel your dealer to guarantee that the product he leaves at your door each morning is free from tuberculosis.

The tuberculin test is the guarantee!

ASK FOR

"Pasteurized Milk from Tested Cows"
THE SAFEST MARKET MILK!

Pasteurization, properly done, safeguards milk against other diseases. It is an excellent additional precaution but must not be considered an adequate substitute for the Tuberculin Test.

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Bulletin
of the
Health Department

MARCH, 1917.

Vol. 7, No. 3.

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of
GEORGE C. RUHLAND, M. D.

Commissioner of Health
of the
City of Milwaukee.

F. W. LUENING,
Deputy Commissioner,
Editor.

LEOPOLD SCHILLER, M. D., Asst. to Commissioner.
E. T. LOBEDAN, M. D., Asst. to Commissioner.
GEORGE R. ERNST, M. D., Supt. of Tuberculosis.

E. V. BRUMBAUGH, M. D., Bacteriologist.

RUSSELL W. CUNLIFFE, City Chemist.

GEORGE E. ADAMS, Registrar of Vital Statistics.

F. T. THOMSON, M. D., Chief Sanitary Inspector.

H. H. BRYANT, D. V. S., Chief Meat Inspector.

STANLEY S. PILGRIM, M. D. C., Asst. Chief Meat Inspector.

FERD. MACK, Division of Contagious Diseases.

Bulletin of the Health Department

MARCH 1917

Spring weather induces us to undertake outdoor activities. From every viewpoint, these activities should direct themselves toward the cleaning up of our homes and their surroundings. The spring cleaning is more than a fad.

Winter has left most homes with an accumulation of rubbish and junk that can do no earthly good and may do much harm. It is, therefore, a matter of wisdom and a sanitary precaution to dispose of these accumulations.

Whether a municipality conducts a "Clean-up" campaign or observes clean-up days or not should make no difference to the householder. All of us, who are resident in cities, should be particularly concerned to do our part toward getting rid of the winter rubbish just as soon as spring weather permits us to do so. We thereby not only guard our own surrounding and, consequently, our health, but the health of others.

No disease can be entirely an individual matter. Even illnesses that are not communicable, nevertheless affect more than just the patient. Others must suffer with him, either in mere annoyance or, more tangibly, in financial sacrifice and added burdens and efforts. As for communicable diseases, they surely are the concern of all of us and, thus, each one of us must do his part to prevent their appearance and dissemination.

One means of doing this is to see that our homes and their surroundings are clean. For disease is dependent for existence upon conditions that are unclean. Scrupulous cleanliness practiced by all of us and practiced everywhere—a cleanliness that is both personal, involving our bodies, and impersonal, involving our homes and surroundings—would, probably, sweep disease from the records of the human race.

CARE OF YOUR EYES:

By G. I. HOGUE, M. D., F. A. C. S., Committee on Prevention of Blindness, Wis. State Assn. for the Blind.

Your eyes are the most delicate organs in your body as well as the most important to you from the standpoint of earning a living and the full enjoyment of life.

Eyesight is a priceless possession and yet we neglect and even abuse our eyes.

The wise owner of an automobile sees to it that the engine and all parts of the machine are inspected every year. How few people take the same amount of care when it comes to their eyes!

The poor showing in schools of many a child is due to poor eyesight which might easily be remedied by the use of proper glasses. Every child before entering school should have a thorough examination of the eyes. What a loss of time it is for that boy who is studying to become a draftsman and who will never succeed because of his poor eyesight.

It is a daily occurrence to relieve headaches by the means of proper lenses. Nearly one-half of all headaches can be traced to the eyes as the starting point. After the age of forty most people need glasses for near work, that is for reading, writing or sewing. A change thereafter occurs every two or three years.

It is the best sort of insurance to have your eyes examined by a competent oculist every two years. Not only for a change of glasses but to note if there is any oncoming disease, for example frequently the earliest sign of Bright's disease can be seen within the eye.

One-half of all the blindness in the world could have been prevented if prompt and proper care had been given in these cases. One-third of all the blindness in this world is the result of so-called "Babies sore eyes," which, if four cents had been expended for four drops of silver nitrate and dropped in the eyes at the time of birth of the child, this would effectively prevent this awful disease and if employed

in every infant would prevent the hardships and sufferings of over 10,000 victims in this country.

The use of tea leaves as well as many other household remedies for the cure of eye disease should be promptly condemned in our strongest language. There are many eye remedies advertised in our newspapers and sold in our drug stores that do permanent harm and sometimes even result in blindness.

It is the most expensive treatment in the end to follow the newspaper advertisements or to take the advice of a drug clerk when it comes to the care of the eyes.

Squint or crossed eyes can be cured without an operation in almost every case where the child comes for treatment before the age of six. Do not accept for one minute such advice, "The child will outgrow this condition." Not only is it unsightly but worst of all the sight gradually disappears from disuse of the eye which turns in or outward.

Trachoma is a dangerous eye disease that leads to blindness if not treated energetically. The infected towel is the usual carrier of this disease.

Wood alcohol has in a number of cases caused blindness and even death. The fumes of wood alcohol are also dangerous. Use denatured alcohol instead as it is safer and cheaper.

In almost every shop or factory there is some man that is bold enough to remove or rather pry out pieces of emery and steel. This person is not an eye specialist and has not looked inside of a medical book usually. This act is a criminal one, for we see infection frequently and even blindness in some cases which has followed this rough and unclean method of removing foreign bodies from the eyes.

Do not allow anyone but a specialist in diseases of the eye to operate upon or prescribe for your eyes.

When working around any emery wheel or machine where pieces of steel are apt to fly off, be sure and always use goggles. There are nearly 200,000 accidents to eyes in

the United States industries every year. In one county in Ohio one eye is lost in every eleven days.

Large signs with the following words should be printed in large letters and hung in a conspicuous place in every shop.

“TAKE CARE OF YOUR EYES.”

“SAFETY ALWAYS.”

Last but not least see to it that you have sufficient light for all near work especially. Do not allow any light to shine directly into your eyes. To avoid any shadows see to it that the light comes over the left shoulder, or if you are left handed that it comes over your right shoulder.

There are 2000 blind people in the state of Wisconsin. One-half or 1000 should never have been blind and you can help by word to prevent an increase in the number of needlessly blind persons in this City and State. WILL YOU HELP?

DENTAL CARE:

(By the United States Public Health Service.)

Out of 330,179 school children examined in the city of New York in 1914, 194,207, or 58.8% suffered from defective teeth. This exceeded the sum total of all the other defects noted by nearly 80,000. Defective teeth impair general health and impede school progress. Disorders of the digestive tract, tuberculosis and various other diseases frequently are preceded by diseased conditions in the mouth. There is a direct relationship between dental development and mental development, and it is absolutely essential to good work in schools that children's teeth be maintained in a healthy condition. The Public Health Service recommends that a good tooth brush be included in the list of Christmas presents for every American child and that its use be made a part of the daily training. If this recommendation is carried out the United States will have more healthy children this year than last and their chances of growing up into useful, healthy men and women will be increased.

THE SPRING FLY CAMPAIGN:

In the annual effort made to reduce flies, it is, of course, of primary importance that the early flies be killed. It is much easier to reduce the insects in the early spring and summer than later in the season when there are thousands, and perhaps millions, of them to cope with. The "Swat the Fly" slogan can be taken literally in spring. This, perhaps, is the one time of the year when it can be so taken. For, after thousands or millions of the insects are swarming about, the effect of a swatter or even many hundred swatters are practically nil. In the spring, however, as the first flies crawl forth from their place of hibernation, they can be killed and, thus, the future numbers will be materially reduced.

More important, perhaps, than killing these first flies, is the destruction or elimination of every possible breeding place. Flies breed in filth. Any accumulation offering moisture, retaining some heat, or, through decomposition, actually creating heat, gives them particularly good fields for development.

It thus is important that manure be hauled away and properly disposed of, or, if accumulations must remain on the premises, that it be thoroughly sprayed with kerosene or borax. Borax, perhaps, is the better, especially because it is not combustible and, therefore, is not likely to cause fires and consequent property loss.

However, manure is by no means the only substance to attract flies, and rubbish of other sorts should be given equal care. The sweepings from homes, ash accumulations, and the rubbish that usually goes with them must, also, be disposed of. Combustible material can, of course, be burned and this is one of the best ways of destroying not only its bulk but also any fly eggs or larvae that may be lodged in it. In fact, if accumulations are not too great and if transportation facilities are difficult to get, burning alone will probably overcome most of the difficulty consequent upon fly breeding in

rubbish. By burning even small quantities and starting the new fires always on the remnants of the old fires, fly larvae will be destroyed as fast as they can develop.

To check the fly evil during the summer, every Milwaukeean should engage in a thorough spring clean-up effort that will involve not only his home, including attic and basement, but also the surroundings of this home, including yard and alley. And, above all, the householder should not permit such a clean-up effort to result in a general dumping of waste and rubbish onto the vacant property in his neighborhood. Flies will develop quite as readily on vacant property as in your own back yard, and, once having developed, they certainly will not devote their attention merely to the vacant property. They will spread from it through the entire neighborhood, so, even though occupied premises may be kept in orderly condition, unoccupied property may be the cause of fly nuisance. And, since this fly nuisance is directly detrimental to the neighborhood, it not only behooves the neighborhood not to be responsible for the accumulation of rubbish on such vacant property but to actually extend its efforts to the property.

Cleaning up a vacant lot is a comparatively small task and yet may mean a great deal to those whose homes adjoin it. It is, of course, true that the owner is legally responsible. Nevertheless, the owner often is remotely located or owns many properties and may not know of the existing conditions. It also is true that small rubbish accumulations, too insignificant to be noticed by the owner on a cursory trip to his premises, or, if noticed, too insignificant to be even unsightly, may yet have great significance from the viewpoint of fly breeding.

So neighbors can well afford to dispose of such waste or, at least, to build the fires, that will destroy their rubbish, upon such accumulations and, thus, kill off the egg or larva of flies.

FLY ALPHABET:

BY CIVICS COMMITTEE ARKANSAS FEDERATION OF WOMEN'S CLUBS.

- A—A swarm of flies around the premises are dangerous.
- B—Be active in the destruction of the fly.
- C—Constant effort destroys the fly.
- D—Do not allow breeding places for flies about your home.
- E—Every fly that lives over winter, becomes a breeder for the early ones.
- F—Flies are carriers of disease, beware of them.
- G—Garbage cans furnish a prolific breeding place for flies. Keep them covered.
- H—House flies are most dangerous to babies. Do not allow one to settle on the baby or its food.
- I—Insist that your and your neighbor's premises are kept clean, then there will be no flies.
- J—July and August are the months in which there is the greatest mortality among children. See that the fly is not responsible.
- K—Kill every fly, especially the large ones, that are around your premises.
- L—Lime, borax, iron-sulphate with water are good to kill the fly maggots in all breeding places, especially the manure pile.
- M—Manure, when left standing in or around the stable or elsewhere, makes a prolific breeding place for flies.
- N—Ninety per cent of flies breed in horse manure.
- O—One winter fly will multiply by September to 5,598,720,000,000 provided none are killed.
- P—Permit no fly to settle on your food, it may bring you the typhus or other deadly germs.
- Q—Quit allowing dirt or filth around your premises. They are fly breeders.
- R—Refuse to buy food that is not protected from flies.
- S—Screen all doors and windows so no fly can enter the house. Keep them out of the sick room.
- T—The house fly, the typhoid fly are to be avoided as something deadly.
- U—Unless your house and yard is kept clean and free from breeding places, you will have flies.
- V—Vigilance in destroying the fly will bring its reward.
- W—Watch the fly as he comes from the larvae and walks over the manure piles or other filthy places. Where does he go next?
- X—Xterminate the fly by all possible methods known to man.
- Y—You are ashamed to have bed bugs in the house; you should be more so to have flies.
- Z—Zeal used in swatting the fly will greatly assist in its destruction.

FOOD:

(From "How to Live". By IRVING FISCHER and EUGENE LYMAN FISK, M.D.)

Some foods, when cooked, lose certain small components called vitamins, which are also found in the skin or coating of grains, especially rice; also in yolk of egg, raw milk, fresh fruit and fresh vegetables—especially peas and beans. These vitamins are very important to the well-being of the body. Their absence is probably responsible for certain diseases, such as beriberi, scurvy, and, possibly, pellagra, as well as much ill health of a less definite sort. Some raw or uncooked foods, therefore, such as lettuce or tomatoes, celery, fruits, nuts and milk, should be used in order to supply these minute, and, as yet, not well understood substances which are destroyed by the prolonged cooking at high temperatures, which is employed to sterilize canned foods. They are also diminished by the ordinary cooking.

It is true that only very clean milk is entirely safe in an absolutely raw state and that heat is usually needed to kill the germs. But this heat need not be enough to cook the milk. The modern method of pasteurization leaves milk still essentially an uncooked food.

In addition to protein, fat, carbohydrate and vitamins, there are other elements which the body requires to maintain chemical equilibrium. These are the fruit and vegetable acids and inorganic salts, especially lime, phosphorus and iron. These substances are usually supplied, in ample amounts, in a mixed diet, containing a variety of fruits and vegetables and adequate amounts of milk and cream. Potatoes are especially valuable because of their alkalinity.

Additional to selecting proper foods, it is important that such foods be properly masticated. Whether it be from lack of hard foods, requiring prolonged chewing, or from the nervous hurry of modern life, it is undoubtedly a fact that most people eat too rapidly. The correction of this habit will far toward reforming the individual's diet in every way. Thorough mastication means masticating up to the point of

involuntary swallowing. It does not mean forcibly holding the food in the mouth, counting the chews, or otherwise making a bore of eating. It merely means giving up the habit of forcing food down, and applies to all foods, even to liquid foods, which should be sipped.

One of the evils of insufficient mastication lies in the failure of the taste nerves to telegraph ahead, as it were, to the stomach and other digestive organs an intimation of the kind and amount of digestive juices required.

The habit of insufficient mastication is subtle, because it has become "second nature" with most of us. To free ourselves of it, we must first of all allow plenty of time for our meals and rid our minds of the thought of hurry.

Slow eating is important, not merely as a matter of mastication, but also as a matter of taste and enjoyment. There is a mistaken notion that the hygiene of food means "giving up all the things that taste good." While it is true, that, in many cases, sacrifices have to be made, the net result of reforming one's diet is not to diminish but to increase the enjoyment of food. In general, it is extremely unhygienic to eat foods which are not relished.

In the choice of foods, it is as difficult to distinguish between what are "good" and "bad" foods, as it is to classify human beings into "good" and "bad." All we can say is that some foods are better than others, remembering that it is usually more important to be satisfied, even if the foods are not "ideal," than to be unsatisfied with what, in the abstract, seem "ideal" foods.

Among the best foods for most people are fruits, potatoes, nuts (if well masticated), milk, sour milk and vegetables. Among the worst foods are putrefactive cheeses, sweetbreads, liver, kidneys, "high" game and poultry. The best way to help the ordinary man choose his foods is to advise him to take as much as possible of the "better" and as little as possible of the "worse," without attempting to draw a hard and fast line between the "good" and "bad."

A great cause of ill health is overuse of sugar in concentrated form, candy, etc., especially by the sedentary. One reason why sugar has a high food value is that it is readily utilized and may lead to overnourishment.

There is, for normal people, no objection to drinking a moderate amount of water at meals — say one or two glassfuls — provided it is not taken when food is in the mouth and used for washing it down.

Food selection may depend upon personal idiosyncrasies. For instance, many people may think that nuts never agree with them, when the trouble really is that they do not masticate them properly. Many think peanuts indigestible, not realizing either the importance of mastication or the importance of avoiding over-roasting. The ordinary peanuts are over-roasted. Peanuts very slightly roasted and very thoroughly masticated seldom disagree with one.

Each individual must use his own intelligence and common sense, avoiding, so far as he can, the mistake of following a fad. It is a good idea to consult a physician in regard to one's diet and endeavor, intelligently, to follow his advice. Moreover, since many, without being aware of the fact, are affected with Bright's disease, diabetes, etc., in their early stages, in which dietetic precautions are especially necessary, it is well, even for those who are apparently in good health, to be medically examined as a preliminary to a rearrangement of their diet along the best lines.

HEREDITY AND CONTAGION IN CANCER:

(Am. Society for the Control of Cancer.)

Perhaps no aspect of the cancer problem causes such widespread apprehension as the possibility of its being inherited. Broadly speaking such fears are probably groundless. When the disease occurs repeatedly in the same family there is a tendency to assume that it is inherited. This reasoning is of course superficial. Newsholme, Bashford and

many other authorities have frequently pointed out that cancer is such a common disease among adults that by the laws of chance alone many cases are likely to occur in some families. It should be remembered that among people over forty years of age in this country cancer causes the death of one woman out of every eight and one man out of every fourteen. It is obvious that repeated instances must occur in some families and this of itself does not prove that cancer is hereditary.

Important laboratory studies tend to prove the hereditary transmission of a liability to cancer among mice, but many leading authorities believe that we are not yet justified in applying these deductions to the human subject. Previous statistical investigation among human beings has failed to establish the inheritance of cancer and Mr. Hunter's study merely adds to the mass of evidence against heredity as a causative factor. In passing upon applications, insurance companies generally regard the history of cancer in the family as of little significance.

While the question of heredity cannot be viewed as absolutely settled, nevertheless the Publication Committee of this Society believes that the practical bearings of competent investigations of the human material should be brought home to newspaper readers in an effort to reduce the present excessive apprehension among the people regarding the possibility of inheriting cancer.

With regard to contagion we are on even firmer ground and the question may be regarded as settled. After countless operations there is no case recorded in which a surgeon or nurse has acquired cancer from the treatment or attendance upon any patient suffering from the disease. The public should be taught that the fear of infection is groundless since apprehension on this score has undoubtedly tended in many cases to prevent the most humane care of sufferers from a disease which, especially in its advanced stages, demands the utmost resources of patient and merciful ministrations on the part of relatives and nurses.

HYGIENE OF THE FEET—THE PREVENTION OF ARCH TROUBLE:

By F. J. GAENSLER, M. D.

Hygiene of the feet is a very important subject, not only from the standpoint of comfort to the individual but also from the standpoint of efficiency. There can be no doubt that a person suffering from tired and aching feet is far less fit to do his day's work than a normal individual. These facts are specially appreciated by the medical officers of our army and especial care is devoted in the examination of recruits to exclude from the service any with defective feet.

At the present time "fallen arches" are a very frequent occurrence but it is not always the foot with the broken or fallen arch that gives most trouble. Indeed, it is not a rare occurrence to find a foot of normal appearance the seat of much pain and subject to early fatigue. A few moments consideration of the anatomy of the foot will serve to clear this up.

The bones of the foot are arranged in the form of an arch, the ball of the foot forming the front support while the heel bone forms the back support. The small bones spanning these points are arranged in the form of a definite arch or instep. These bones are held in position by means of ligaments and muscles, each contributing a certain share toward the support of the arch under weight bearing. These supports are not always adequate. Rapid increase in weight, prolonged illness, change of occupation requiring more prolonged standing, especially on hard floors, all tend to reduce these muscular and ligamentous supports.

In terms of the architect one would say the load is too great for the strength of the material. The muscles are relaxed, the arch begins to sag and the ligaments are gradually stretched, and it is this gradual stretching which is responsible for the pain and fatigue. These pains are especially annoying during the early stage before actual lowering of the arch has resulted and this explains why it is possible to have

all the symptoms of a broken or weak arch in a foot of perfectly normal outward appearance.

On the other hand persons with pronounced flat foot may show no symptoms whatever. The ligaments have all been stretched to the utmost, the arch is completely lost and with the absence of further strain on the ligaments there is also absence of pain but in these instances the individual's efficiency is also reduced. The elasticity of the foot is lost and the victim has a heavy awkward gait and would be unequal to any task requiring normal muscular power in the foot. It is easily seen, therefore, that the question is not so much one of form as of function.

The pains of weak feet are frequently mistaken for rheumatism but the remedies usually bringing relief in rheumatic conditions are of no avail here.

Now what can be done to prevent this condition of weak foot? With proper care one should be able to avoid this condition in the great majority of cases. The first requirement is a properly fitting shoe. Naturally, no type of shoe will meet all requirements, nor will one type of shoe fit all normal feet. There are individual differences which must be taken into consideration. As a general rule, however, the normal foot will require a straight lasted laced shoe with broad toe, narrow instep and a low broad heel. The straight last and broad toe will allow perfect freedom for the toes whereas the tapering shoe will predispose to bunions and crowding of the toes. The narrow instep is necessary to give support to the arch and the low broad heel gives the necessary stability. A slight elevation on the inside of the heel is often of much value in overcoming the lesser discomforts of weak foot.

In the foot with normal muscular power the shoe should be sufficiently flexible to allow proper exercise of the muscles while in those with weakened muscles some stiffening is required to give support until the muscles become stronger when the flexible type may be substituted.

Much may be done in the way of exercises to strengthen weakened muscles. Turning the soles of the feet inward as

much as possible, at the same time bending the ankles upward, tip-toeing, walking on the outer borders of the feet for a few minutes several times daily and above all walking with the toes pointing directly forward are very useful, while massage and cold baths, also frequent changing of shoes and stockings are of great importance.

Arch plates should be resorted to only in the more severe cases and even then should be regarded as temporary supports just as one would use a crutch, during a temporary disability, to be discarded as soon as the measures just indicated have resulted in sufficient strengthening of the foot. The low heel, however, is not always to be recommended; not infrequently the trouble is aggravated by a sudden change from a high to a low heel. This is due to the fact that the heel cord, especially in women, has become gradually shortened from the constant use of high heels. In such cases, a low heel would result in marked stretching of the heel cord with resulting discomfort, not only in the foot but also behind the knee from the strain of the cords. The gradual lowering of the heels is, therefore, desirable, in some cases. In a large majority of cases attention along the lines indicated will be of material help, not only in the prevention of foot trouble but also in relieving difficulties dependent upon already existing weakness.

CARE OF THE BABY:

Warm weather will bring the usual infants' ailments. The United States Public Health Service, in a bulletin issued in 1916, says:

"Bad air, bad milk, over-crowding, poverty, dirt, ignorance and heat — these combine in summer to kill the city baby. It seems as though the brunt of the cities' sanitary sins were focused on the baby.

The baby did not ask to come into life in a hot, dark, air-tight tenement, to be fed on dirty, half spoiled milk, to

be pestered with flies and mosquitos. He is not responsible for any of these conditions and it is his right that he have fresh air, clean surroundings and decent food.

The United States Public Health Service issues, free of charge to all applicants, a bulletin on the summer care of infants. It should be in the hands of every mother."

However, regardless of what the summer ills may be, they never should be "cured" with patent nostrums. Dr. Theodore C. Merrill, in a recent pamphlet, says:

"Speaking of children's special ills, perhaps no troubles are commoner than the various forms of diarrhoeal diseases which come to annoy or threaten the child and its mother. We are learning that these diseases are great death producers among young children and infants. The experienced physician regards with dread the occurrence of a summer diarrhoea in a weakly child or infant. Such diseases make the infant mortality expert point again to figures which he knows should need no further exploitation. From colic to cholera infantum, however, the public is promised immunity and deliverance. Prevent by hygiene, diet, and management, so far as possible. If disease still comes, do not delay and flirt with sorrow by depending on the diarrhoea cureall. From slight diarrhoea to severe dysentery, the progress may be astonishingly rapid.

Most diarrhoea preparations are also recommended to soothe the restlessness of "teething" which, as we have learned to know, is likely to be made the object of narcotic applications. Here is a phrase taken verbatim from the label of a diarrhea mixture containing alcohol, ether, and opium — a somewhat unusual combination: "Are a most certain cure for summer complaints of children, for cramps, and convulsions in teething." The cruelty of a label advocating some narcotic application, by untrained persons, in cases of infantile convulsions due to whatever cause needs, I am sure, no comment.

THE TRAP:

In Southern California several ages ago the oil escaping from a small spring formed in a depression of the earth a little pool. The lighter portion of the oil evaporated leaving the sticky asphalt. From time to time the rains covered the surface of the pool with water, animals and birds came down to drink, sank into the asphalt and were imprisoned in this gigantic animal trap. The hungry wolves saw there before their eyes fresh animal food of every sort, from the enormous mastodon to the smallest bird. They, too, were drawn into the trap as were also the large saber-toothed tigers which then roamed that vicinity. Today scientists are engaged in excavating the bones deposited there by indiscreet appetite.

One of the great elements in maintaining health is the regulation of the bodily intake to meet the appetite. The man who works with his hands requires more food than the brain worker. The man who labors in the open air needs more nourishment than he who sits cooped in an office all day long. Give the sedentary worker the appetite of the day laborer and if that appetite be uncontrolled the body will become clogged with the poisonous products of its own manufacture and physical deterioration will surely follow. It is just as bad to eat too much as it is to eat too little. To indulge the appetite to too great an extent is equally as pernicious as its constant repression. The best is to be found in an average course, neither over- nor under-indulgence, neither the following of the inelastic dietary nor the promiscuous and ill-considered use of foods. Many a so-called case of dyspepsia is nothing in the world but the rebellion of an over-worked stomach, the remonstrance of a body which has been stuffed to repletion. A great deal has been accomplished in the reduction of infant mortality because we are able to control what infants may eat. Adults must for themselves exercise this as self control. If this is done there will be a decline in our adult mortality rates and the increase in health and efficiency.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

February, 1917.

Annual Death Rate per 1000....	14.3	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	25.1	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	8.1	Annual Death Rate, Females....	6.2
Annual Birth Rate, Males.....	13.1	Annual Birth Rate, Females....	12.
Death Rate less, Violence.....	13.6	Birth Rate less, Still Born.....	24.4

Deaths recorded	527	Births recorded	922
Marriages	297		

BIRTHS.

SEX.

Males	482
Females	440

COLOR.

White	921
Colored	1

REPORTED BY

Physicians	673
Midwives	240
Others	9

NATIVITY OF PARENTS.

Father Mother

Milwaukee	121	131
Wisconsin	283	328
United States	103	102
Germany	92	71
Poland	89	77
Austria	48	55
Bohemia	2	3
Sweden	2	—
Italy	34	32
Roumania	1	2
England	2	2
Holland	1	1
Norway	1	2
Slavonia	7	4
Hungary	43	41
Russia	53	47
Canada	4	5
Greece	11	10
Unknown	14	—
Ocean	1	—
Elsewhere	10	9

BY WARDS.

First	30
Second	36
Third	31
Fourth	15
Fifth	32
Sixth	34
Seventh	19
Eighth	42
Ninth	53
Tenth	22
Eleventh	37
Twelfth	47
Thirteenth	50
Fourteenth	53
Fifteenth	13
Sixteenth	19
Seventeenth	34
Eighteenth	20
Nineteenth	14
Twentieth	44
Twenty-first	24
Twenty-second	31
Twenty-third	36
Twenty-fourth	41
Twenty-fifth	40
Hospitals	105
Pairs of twins.....	8
Triplets	—
Illegitimate	25
Still Born	27

MARRIAGES REGISTERED.

GROOM.

Oldest	64
Youngest	20
Widowed	22
Divorced	12

COLOR.

White	297
Colored	—

NATIVITY.

	Groom	Bride
Milwaukee	13	13
Wisconsin	138	178
United States	42	28
Germany	24	15
Poland	19	11
Austria	18	14
Bohemia	—	—
Sweden	—	—
Italy	5	4
Roumania	—	—

AGE.

GROOM.

Under age	11
21 to 25	110
25 to 35	139
35 to 45	22
45 to 55	8
55 to 65	6
65 to 75	1
Over 75	—

BY WHOM.

By Judges	32
By Justices	18
By Ministers	247

RESIDENCE.

Outside State	35
Outside City	16
Married outside State.....	3

BRIDE.

Oldest	62
Youngest	16
Widowed	24
Divorced	19

COLOR.

White	297
Colored	—

NATIVITY.

	Groom	Bride
England	3	4
Holland	—	—
Norway	—	—
Slavonia	—	—
Hungary	8	10
Russia	15	11
Canada	1	1
Greece	6	5
Elsewhere	5	3
	297	297

AGE.

BRIDE.

Under age	6
18 to 25	191
25 to 35	71
35 to 45	22
45 to 55	5
55 to 65	2
65 to 75	—
Over 75	—

BY WHOM.

By Judges	32
By Justices	18
By Ministers	247

RESIDENCE.

Outside State	31
Outside City	10

COMMUNICABLE DISEASES.

For the month of February, 1917.

	Last Report	New Cases	Died	Recov- ered	On hand
Scarlet Fever	413	433	12	293	542
Diphtheria	49	67	7	72	38
Small Pox	—	—	—	—	—
Measles	11	32	—	23	20
Whooping Cough	118	94	4	80	129
Typhoid Fever	4	9	6	1	8
Chicken Pox	55	113	—	145	23
Meningitis	—	2	4	—	—
Erysipelas	16	20	2	22	12
Total.....	666	770	35	636	772
Tuberculosis	2927	52	28	*15	2933

* 13 died out of city.

Number of fumigations	7
Cubic feet fumigated	25,000
Fumigators used	25

FERD. MACK, JR.,
Assistant Chief Inspector.

WORK DONE BY SANITARY INSPECTORS.

No. of orders served.....	459	No. houses disinfected.....	360
No. of complaints received.....	536	No. calls by ambulance.....	83
No. if inspections made.....	3635	No. visits to schools.....	53
No. of cultures del. and col....	215	No. funerals attended.....	11
No. visits to quarant. houses....	1233	No. arrests	5
No. houses placarded.....	442		

DR. T. F. THOMSON,
Chief Sanitary Inspector.

DEATHS.

According to Cause, Annual Rate per 1000, and Deaths in Public Institutions.

Months.....	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.
Total Deaths.....	523	565	534	495	367	458	375	403	419	395	470	534	527
Annual Death Rate.....	14.59	15.76	14.88	13.82	10.24	12.78	10.46	11.24	11.69	11.02	13.12	14.56	14.37
Typhoid Fever.....	10	21	7	4	4	3	1	5	3	2	2	1	6
Measles.....	22	35	24	7	1	1	0	0	0	1	0	2	0
Scarlet Fever.....	3	5	9	5	4	4	0	1	3	3	3	4	12
Whooping Cough.....	4	2	2	2	0	2	1	6	2	1	1	2	4
Diphtheria.....	3	6	9	7	3	3	0	6	11	9	10	15	7
Influenza.....	6	4	0	1	0	1	1	0	0	2	1	2	7
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Phthisis.....	26	39	29	31	36	30	16	19	22	22	31	28	28
Cancer.....	26	22	26	31	34	45	34	28	41	33	28	31	27
Meningitis.....	8	5	6	10	6	3	7	3	1	4	4	5	4
Apoplexy.....	23	22	30	31	18	19	16	18	34	24	22	20	24
Org. Heart Disease.....	30	34	49	35	32	35	25	32	40	34	42	44	32
Bronchitis.....	13	16	16	21	13	8	5	4	8	5	16	16	27
Pneumonia.....	88	103	98	86	30	19	27	21	37	33	78	117	125
Diarrhoea—Under 2.....	46	15	16	12	8	13	36	51	16	14	17	14	16
Nephritis.....	24	25	19	28	25	20	24	22	28	27	32	34	25
Congenital Debility.....	41	49	37	27	23	30	24	31	16	35	31	28	26
Senility.....	15	12	8	10	9	10	6	6	6	9	5	16	15
Violence.....	21	17	23	31	25	93	40	24	22	28	25	28	26
Suicides.....	3	5	6	3	8	9	3	7	7	9	4	7	4
Homicides.....	0	0	1	3	1	0	0	1	0	0	1	3	0
Under 30 days.....	43	62	48	39	34	44	36	40	42	51	62	51	55
Bet. 30 days and 1 year.....	116	77	83	72	26	35	55	68	37	31	29	52	68
Bet. 1 and 5 years.....	53	83	78	49	26	25	30	35	31	18	35	35	34
5 to 60 years.....	180	218	187	211	171	217	162	147	167	169	212	223	205
Over 60 years.....	131	125	138	124	110	137	92	113	142	126	132	173	165
Age at death—all ages.....	31.3	30.8	32.	34.6	39.5	40.9	35.2	35.4	40.6	40.6	38.	41.2	35.8
Age at death—over 5.....	53.	50.5	52.4	50.5	51.6	52.5	51.	53.5	55.	52.8	51.8	55.5	53.6
Public Institutions.....	107	81	71	117	78	108	89	57	85	106	107	108	123

ORDINANCES YOU SHOULD KNOW

DRUGS NOT TO BE THROWN ON STREETS:

Section 903. It is hereby made unlawful for any person, firm or corporation, or for any officer, member, agent, servant or employe of any firm or corporation to leave, place, throw, deposit or distribute any sample packages of any patent or proprietary medicine, or any preparation, pill, tablet or drug, or compounded drug whatsoever, in or upon any lot, doorstep, private dwelling house, public building, store or office building, or to deliver to any child under the age of fifteen years, when not accompanied by an adult, any patent or proprietary medicine, or any preparation, pill, tablet or drug, or compounded drug whatsoever, or to place, throw, deposit or distribute any sample packages of any patent or proprietary medicine, or any preparation, pill, tablet or drug, or compounded drug whatsoever, in or upon any sidewalk, highway or other public place or park within the limits of the city of Milwaukee.

DEMAND MILK FROM **Tuberculin Tested Cows!**

Consumption in cattle is catching.

*You may be "drinking it" with
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It is stupidity to expose your children to the diseases of dairy animals.

Don't do it! Compel your dealer to guarantee that the product he leaves at your door each morning is free from tuberculosis.

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Bulletin

of the

Health Department

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CITY OF MILWAUKEE

Published Under the Direction

of

GEORGE C. RUHLAND, M. D.

Commissioner of Health

of the

City of Milwaukee.

JOHN L. MEYER,

Deputy Commissioner,

Editor.

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FACULTY

GEORGE C. RUHLAND, M. D., Director.

LEOPOLD SCHILLER, M. D., Contagious Diseases.

E. T. LOBEDAN, M. D., Child Welfare.

GEORGE R. ERNST, M. D., Tuberculosis.

E. V. BRUMBAUGH, M. D., Bacteriology.

RUSSELL W. CUNLIFFE, Chemistry.

GEORGE E. ADAMS, Vital Statistics.

F. T. THOMSON, M. D., Sanitation.

H. H. BRYANT, D. V. S., Food Hygiene.

MRS. EDITH BAILEY, Public Health Nursing.

MISS HARRIET KETTER, Social Service.

Bulletin of the Health Department

APRIL 1917

CLEAN-UP AND PAINT-UP:

By GEORGE C. RUHLAND, M. D.

Beginning the second week of May, the Health Department will launch upon its annual "clean-up" campaign.

How far this campaign will succeed will depend largely upon the help you are willing to give.

There is need for a "clean-up" now and always.

According to Dr. Wardell Stiles of the United States Public Health Service: "The United States are eleven times dirtier than is Switzerland."

This may jolt our vanity and it is to be hoped that it will jolt our vanity—vanity of the type that prefers cleanliness to dirt. There is nothing gained by deluding ourselves in this matter; the sooner we wake up to the truth of the situation, the better for us, provided such awakening is coupled with a determined effort to improve.

Dirt and filth go hand in hand with disease. Typhoid fever is a filth disease. It is significant that the United States has a typhoid rate eight times greater than any other civilized country.

This is not because we don't know any better but because we don't care.

Be honest with yourself. How much do you do to keep your home and city clean? How much rubbish is there in your cellar or garret? How much do you contribute to the waste paper and trash that is thrown into the streets?

Do you realize that tin cans, carelessly thrown out, afford an excellent breeding place for disease carrying mosquitoes? Do you know that unwrapped garbage and the uncovered

manure pile make ideal feeding and breeding places for flies and that these flies may bring disease into your home?

A little thoughtfulness and a little effort in these matters will go a long way in making ours a cleaner and healthier city.

Begin now to do your share of this work. Collect and sort all papers, bottles, tin cans, rubbers, rags and old clothes and sell them. Turn this wastage into a revenue. Burn what cannot be disposed of in this way.

Finally, remember that whitewash and paint, soap and water and a scrub brush are a mighty good policy of insurance not only for your property but also for your health.

CLEAN HANDS:

The United States Public Health Service Says:—

Disease germs lead a hand to mouth existence. If the human race would learn to keep the unwashed hand away from the mouth many human diseases would be greatly diminished. We handle infectious matter more or less constantly and we continually carry the hands to the mouth. If the hand has recently been in contact with infectious matter the germs of disease may in this way be introduced into the body. Many persons wet their fingers with saliva before counting money, turning the pages of a book, or performing similar acts. In this case the process is reversed, the infection being carried to the object handled, there to await carriage to the mouth of some other careless person. In view of these facts the U. S. Public Health Service has formulated the following simple rules of personal hygiene and recommends their adoption by every person in the United States.

Wash the Hands Immediately—

Before eating;

Before handling, preparing or serving food;

After using the toilet;

After attending the sick, and

After handling anything dirty.

THE HYGIENE OF THE NERVOUS SYSTEM:

By RICHARD DEWEY, A. M., M. D.

I. On the maintenance of normal nervous conditions.

Having been asked to offer some suggestions as to what pertains to health of the brain and nervous system, I will endeavor at this time to present some thoughts that may be practically useful to those who, having a healthy brain and nervous system, wish to keep it so; and perhaps in a later article will take up the case of those who have various handicaps to contend with in consequence of a more or less abnormal brain and nervous system.

Those who fortunately possess a sound organization would seem perhaps to stand in need of little advice, but it has been my observation that many of these fortunate people are greater sufferers from nervous maladies than others who are forced by the very fact of their infirmities more carefully to safeguard themselves. People of vigorous constitution are apt to be reckless and moreover many a rugged, robust young man, while excelling in "brawn" may not have a very stable brain (this applies also the gentler sex in these days of athletic womanhood). The cultivation of muscular force without nerve control (natural or acquired) produces an ill-balanced combination. How many finely developed men and women I have seen who, thinking there was no limit to their capacity for exercise of mental or physical energy in the pursuit of any study or sport (philosophy, psychology, tennis, dancing—what you please) have brought themselves to a state of neurasthenia by continued strenuousness! Their reserve supply of nerve force was thus used up. Nerve force is like your balance in the bank—if you keep drawing cheques and do not make necessary deposits, your reserve or "balance" is soon gone. For the "nervous balance," sleep and rest and nourishment are the "cash" for the bank balance and must be regularly and carefully attended to. Many a bright young man thus uses up, in a nervous sense "his bottom dollar" every day, and when an emergency comes along, has nothing left.

It seems to be necessary for some individuals, before they will learn to properly safeguard their health, to suffer a nervous breakdown. This serves as a lesson and a warning and many such people will enjoy better health for the rest of their lives if the lesson is properly heeded. There are many who seem to be destitute of the proper "fatigue sense," that is, they are not conscious of overdoing or of being tired until they reach an extreme point, sometimes bordering on collapse. There are people of earnest and ambitious temperament who pursue the object of their endeavors with great strenuousness, careless of sleep and food, and only yield when literally no longer able to keep on. Then a long and wasteful period of rest and recuperation may become necessary. It is only possible for those organized in this manner to properly care for themselves by fixing arbitrary limits to their efforts.

Let us consider sleep and some of the obstacles encountered in securing it. One important obstacle is naturally "staying up of nights." People find life interesting, especially nervous people, and after the day's work, various beguilements present themselves which steal away hours needed for rest; it is too easy to take two or three hours for pleasure that ought to be given to sleep. To give these hours to the "dull forgetfulness" is a bore. Life is so full of a "number of things" (pace R. L. S.) that are more alluring than the darkness and silence of sleep, that they dissipate their strength. With one it is social attractions; with another sport, the stage, conviviality. The attractions of the best girl (or boy) makes the infatuated one "miss the last car"; others have (aside from ordinary intemperance) intemperate working habits, "burning the midnight oil" in study that is a weariness to the flesh. Another, after the proper day's work, gives half the night to pleasure. The work in itself would do no harm, but one cannot "burn the candle" at both ends. (This is all very trite, but not the less apt to be forgotten.) The even distribution of work and play and rest should be the keynote. There are few exceptions to the "eight hour rule."

Then, again, people easily get themselves into conditions where, even if they go to bed, they do not sleep. Excitement of

various sorts produces wakefulness. Insomnia is the bone of nervous people. Stimulants, tobacco, coffee and tea, the theater, social festivities, even exciting reading, do not prepare the way for sleep. People troubled about sleep should take a light and early supper and spend the evening quietly, getting early to bed.

While on the subject of sleep, another thing worth knowing is that people troubled with wakefulness often aggravate their condition by their fear and apprehension about not being able to sleep. When they waken, the subconscious thought comes to the surface. "Here I am broad awake again and goodness knows whether I can get any more sleep!" This feeling or fear of itself destroys sleep. I have often relieved the nervous insomniac by advising him not to be troubled by the mere fact of waking up. Every one is apt to waken up occasionally and if, not disturbed by this fact, he calmly turns over and concludes to go asleep again, he can generally do so. It is the *fear* and *anxiety* about his sleep that keeps him awake. He should relieve his mind by remembering that if he rests quietly in bed, this alone will be beneficial.

SCARLET FEVER UNUSUALLY PREVALENT:

(By the United States Public Health Service.)

Since about the first of the year scarlet fever has been unusually prevalent in certain cities. This has been particularly true of cities in the region of the Great Lakes and especially in Detroit. From January 28 to March 24 there were reported in Detroit this year 1,725 cases of scarlet fever. During the corresponding period last year the number reported was 250, approximately seven times as many cases being reported this year as last. During the same period there were reported this year in Chicago 4,233 cases and last year 2,166 cases, the number this year being approximately twice that of last year. In Milwaukee there were reported this year, from February 25 to March 24, 518 cases, while last year the number was only 124.

"NET WEIGHT, 000 OZ." :

By JOHN L. MEYER. Deputy Com'r of Health.

Forgetting for the moment the big item of *quality* in foods and other necessities.

You jump on the butcher, the baker and even the candlestick maker when it comes to the matter of *quantity* for a given price. In short, you invariably insist on your money's worth in the *amount* of food, drink, soap or other necessities that comes over the counter. Let the merchant get "under weight" but the smallest fraction of a pound and there you have the possibilities of a nice little fuss—sometimes a summons into court.

But do you watch the net weight or measure legend on your purchases of *packaged goods*?

Manufacturers or distributors of many packaged products are required by city, state and national laws to show the net weight or measure of the contents. These laws are carefully enforced. They are generally observed.

The honest manufacturer and the officers of the law have done their shares. Yet the public, even in the midst of the greatest movement for economy and conservation of foods that this country has ever known, fails largely to make the net weight laws really effective because so few go to the trouble to "look for the net weight on the package." Let's go into this farther.

The net weight contents of certain packaged products have decreased, with marked increases in the prices per package. Others have remained stationary in price, and the net weight has taken a decided slump.

Ascending prices of raw materials, that make up manufactured products, are felt just as keenly by the packaged product makers as by your baker or grocer.

Well and good. This has nothing to do with the merit price increases.

Neither has it anything to do with the manufacturers or distributors who have played the game in the open.

But the public is letting by an uncounted number of packaged products which have slyly reduced the contents of their packages in recent times. The net weight labels prove this, but no one pays any attention to net weight or measure labels—and these fellows know it!

It is gratifying to know that most of the really worthy, widely-known articles sold in packages, are not in the class of the foxies.

Watch the unknown, “just-as-good” products! Read the net weight labels. Keep tabs on them. Watch them now, as never before.

Don’t let them slip over reductions in quantities at specified prices with the ease and facility of a well-greased, ball-bearing piece of silenced machinery. You are watching every penny you spend for bread and meat and drink. You want your money’s worth, every time.

Well, then, see that you get it not only from the grocer and the butcher on products that he weighs out on his store scales—just as carefully see to it that the other kinds of purchases, here outlined, are up to the scratch.

THE MILWAUKEE HEALTH DEPT. SCHOOL OF HEALTH AND SANITARY SCIENCE.

RESOLVED, by the Common Council of the City of Milwaukee, that the Health Commissioner is hereby authorized to organize and establish a school of sanitation to be known as the Milwaukee Health Department School of Health and Sanitary Science, for the purpose of giving instruction in health and sanitary science, and to name from said department the officers and faculty of the same, and to prepare and publish literature in the furtherance of said purpose.

The Health Commissioner is authorized to transfer any periodical, bulletins or other publications now regularly issued by his department to the aforesaid school.

PATENT MEDICINES

This is the time when thoughts turn to "spring tonics."

A "spring tonic" is anything that a gullible public can be persuaded into buying in spring, for the relief of real or fancied troubles or for the purpose of general rejuvenation.

The chief merit of a "spring tonic" lies in the money that it produces for its manufacturer. The American public has been educated into paying about \$75,000,000 each year for "spring tonics" and other patent medicines.

The choice of the proper "spring tonic" depends upon your preference for label and type of package; also, whether you want it in liquid, powdered or tablet form, and, of course—the price.

"Spring tonics" are always specific. They cover your case exactly. They are for everything that may trouble you, from baldness to ingrown toenails. If you suffer from headache, eye-ache, toothache, stomachache, backache, toeache, or any other ache—especially if accompanied by dizziness, palpitation of the heart, biliousness, constipation, etc., etc., you need a "spring tonic." Only, of course, you ought to take lots of it. Better buy it by the case, and, naturally, the more you pay the more virtue there is to it.

Now, "spring tonics" have no greater virtue—if as much—than mother's modest formula of sulphur and molasses.

"Spring tonics" are, essentially, physics, laxatives and cathartics sold at a fancy price.

A far better, safer and altogether preferable formula for a "spring tonic" for you is this:

Eat less and plainer food, and chew it well.

Drink water freely.

Exercise regularly.

Mix with this a determination to look upon the brighter side of things and you will have an efficient remedy for what ails you.

THE COST OF IGNORANCE:

A little, but mighty publication of the Indiana State Board of Health (H. E. Barnard, Commissioner), and entitled "Medical Frauds", is particularly interesting anent the present season and the discussion of "spring tonics." Says the booklet:

"It is ignorance that makes it possible for patent medicine men to sell a hundred million dollars' worth of their concoctions every year; it is ignorance that thinks fat will disappear after dosing with Pornotis or that Sargol has a miraculous power to increase weight; it is ignorance that believes rheumatism can be cured before the cause of the pain is removed; it is ignorance that thinks beauty can be purchased in bottles of Spurmax or Canthrox, and it is ignorance that tolerates the idea that self-prescribing can relieve pain or disease."

Excerpts from the booklet follow. Each subject is handled briefly, but how pointedly!

ALPEN SEAL:

"The Alpen Chemical Company, of Chicago, manufacturers of this preparation, claim 'it increases woman's power'. This claim, of course, is meaningless and is doubtless used to surround the preparation with mystery. Alpen Seal is a solution of oil of cinnamon, glycerine, saccharin and vegetable extractions and is sold at the rate of fifty cents for two cents' worth of ingredients."

ANAZYME:

"According to the manufacturers of this preparation, the Maltbie Chemical Company of Newark, N. J., it 'makes an excellent gargle for tonsilitis.' It consists of borax 50%, alum 26% and boric acid 24%. In addition to being somewhat incompatible, it is sold at the rate of fifty cents for three cents' worth of common drugs."

-EM-SALZ:

"'A substitute for mineral water' is the claim made by the American Laboratories, Philadelphia, Pa., for their product Bad-Em-Salz. It consists of the following:

Salt	13 per cent
Glauber's salt	42 per cent
Baking Soda	36 per cent
Cream of tartar	9 per cent

and is sold for a quarter of a dollar. The actual value of the ingredients is about two cents."

BEECHAM'S PILLS:

"According to the British Medical Association, these pills consist of aloes, powdered ginger and soap. One-half cent would be a high price to pay for the ingredients of a twenty-five cent box."

BERLEDETS:

"Berledets are composed of the following:

"Boric Acid	58 per cent
"Sugar	15 per cent
"Starch	21 per cent
"Water	6 per cent

"The Berledet Company of Chicago is responsible for these foolish tablets and sells them for fifty times the value of the ingredients.

CASCA ROYAL PILLS:

"A mixture of sulphide of lime, capsicum and a trace of belladonna, that was declared misbranded by the federal authorities when sold under the original name 'Castor Oil Pills.' A twenty-five cent package is worth but two cents."

FRUITOLA:

"Were it not for the suffering involved, the attempt of Pinus Medicine Company to sell fifteen cents' worth olive oil and a couple of seidlitz powders for a dollar, would be laughable."

JAD SALTS:

"This conglomeration is labelled to contain citric and tartaric acids, sodium phosphate, potassium bicarbonate, sodium bicarbonate, sodium chloride, lithium carbonate and hexamethylenetetramine. With the exception of the last two, which are present only in exceedingly small quantities, these ingredients are of the cheap and common variety. The contents of a fifty cent bottle are not worth ten cents."

LIMESTONE PHOSPHATE:

"Chemically, there is no such compound as limestone phosphate. . . . On the label of the package, however, the word 'Brand' appears between 'limestone' and 'phosphate' and the pure food law is therefore not violated. Analysis shows this 'hot water assistant' to be a common and cheap effervescent mixture, depending for its principal action on ordinary sodium phosphate. The contents of a thirty-five cent can are not worth five cents."

MARMOLA:

"Both dangerous and fraudulent in that dried thyroid gland is the active principle and the contents of a fifty cent package are worth but two."

NERVINE:

"A mixture of camphor, glycerine and valerian that is 'Recommended for nervousness and epilepsy'. In this case four cents worth of ingredients are sold for fifty."

PERUNA:

"Several years ago, according to the Journal of the American Medical Association, the federal authorities ruled that Peruna did not contain sufficient medicine to prevent it being used as a beverage. The manufacturer thereupon added a laxative and the sales diminished. This seems to prove that Peruna possesses no medicinal properties, other than laxative, and is an alcoholic stimulant."

A ROMANCE OF CORN:

From "Good Health."

Twenty years ago there began in Illinois an experiment in breeding that reads like a romance.

One experiment alone has given the following results:

The original variety, containing 4.70 per cent of oil, in 1896, now yields a percentage of 8.29 per cent of oil. In another strain, the oil content has been *reduced* from 4.70 to 3.07 per cent.

Also, in the case of corn: The original variety contained, in 1896, 10.92 per cent of protein; in 1915 the descendants of this same corn contained 14.53 per cent of protein. Another strain, in which is sought to *reduce* the protein content, yielded, in 1915, but 7.26 per cent, as against the original 10.92 per cent.

The purpose throughout these experiments has been to demonstrate the ease with which, by proper breeding, corn can be better adapted to the various purposes for which it is used. In feeding, for instance, a protein corn with a higher protein content is desired, whereas in the industries, a greater proportion of oil and starch is needed.

Still other experiments had to do with producing alterations in corn with respect to high and low earing. After thirteen generations of breeding, a difference of six feet has been obtained in the relative position of the ear on the stock. This result, while it has little commercial value as yet, shows how readily a crop like corn responds to careful breeding.

And yet the human plant is just as susceptible to proper mating; it can be adapted to the conditions under which it lives; it can be made more immune to conditions of disease; it can be made to serve more efficiently in the job which is given it; quantities which may have success in the commercial world or the field of science, or in literature and education—this can be increased by applying the common sense methods applied to cereals and live stock.

GENERAL HYGIENE:

From "How to Live," by IRVING FISHER and EUGENE FISK, M. D.

Public hygiene has made much progress during recent years. In consequence, the number of deaths from the acute or infectious diseases has been greatly diminished. Health officers are beginning to demonstrate the truth of Pasteur's words, "It is within the power of man to rid himself of every parasitic disease."

It is this work which has reduced the general death-rate in civilized countries and sometimes cut it in two, as at Panama. The United States Public Health Service, on invitation of the Peruvian Government, recently cut the death-rate in two in one of Peru's disease-ridden cities.

Individual hygiene, on the other hand, has been greatly neglected, especially in the United States, and, doubtless largely as a consequence, the death-rates from the chronic or degenerative diseases are increasing rapidly. A further consequence is that, in the United States, while the death rate in the early years of life (when infectious diseases do most of the killing) is increasing. In Sweden, on the other hand, where individual hygiene is more generally applied, the death-rate is declining at all times of life.

Both public and individual hygiene are being invoked in the fight against tuberculosis, a disease at once infectious and chronic, due to germs and to wrong methods of living.

No matter how thoroughly an individual attempts to care for his own health, he will find it almost impossible to avoid infections, at times, without the organized help of the community in which he lives. A man may do his best to keep his windows open, to breathe deeply, to eat hygienically, to hold his activities within the limits of overfatigue, to screen his house against flies and leave no tin cans about his kitchen or to breed mosquitoes; but if the city in which he lives has no good air for him to breathe, if his city's water supply is contaminated, if neighboring malarial swamps are not drained or covered with oil, if flies alight on the food before it comes to

his own house, if the food contains disease germs or dangerous preservatives, or if his next-door neighbor visits him and leaves infection behind him, mere personal defenses will hardly be adequate.

Even in so private a matter as moving the bowels, sometimes the fault lies partly with circumstances beyond the control of the individual. Unfortunately in most of our cities and small towns "Comfort Stations" are rare or unknown, and when they are available they are often in such an insanitary condition as to be a source of danger through the spread of communicable disease. Constipation, as we have seen, is a far more serious matter than it is sometimes thought to be.

It is therefore incumbent on the individual to contribute his share to the hygienic work of society as a whole, in particular to take an active interest in health legislation and administration. A man cannot live to the best advantage in a life isolated from all social obligations, any more than could Robinson Crusoe, who was unable to launch his canoe in the ocean, after he had been at great pains to construct it; because he had no one to help him. Each man should take part in the great social hygienic struggle, if he is to reap the highest rewards in his own personal hygienic struggle, and he can do a great deal if he will be patient and persistent. If, for instance, he would always insist on suitable aid conditions in public buildings, electric cars, theaters, and churches, and encourage others to do so, it would not take long to make air reform general.

FIRST AID TO THE INJURED:

Sprains—A sprain is produced by a sudden twisting or straining of a joint. Sharp pain, which is increased on motion, is the first symptom of the injury. This usually is followed by a rapid swelling of the affected parts, which may become discolored as of a bruise. While in most instances the injury of the sprain is slight and recovery takes place within a few days, some sprains may prove very troublesome and give rise to more discomfort than results from a broken bone. All forms

of sprains mean some tearing of joint ligaments. Severe and obstinate sprains have been found upon X-ray examinations to be accompanied by fractures of bones at or near the joint.

Every sprain, except the very mildest, should have the attention of a physician. Until the physician arrives, or when no doctor can be had, the joint should be bathed in hot water for from twenty to thirty minutes, and then be put at absolute rest. Rest in bed usually is preferable, especially if the knee joint is involved. In case of injury to an arm, the joint should be supported on a pillow or by splints. After the subsidence of the acute pain and other symptoms of the injury—and this may be a matter of days or even weeks—the joint should be massaged daily and very carefully moved, increasing the extent of the motion gradually until the normal range is re-established.

EATING AND TALKING:

From "Medical Sociology," by JAMES P. WARBASSE, M. D.

We are becoming convinced that thorough mastication is highly desirable. Confirmed dyspeptics are curing themselves of their ailments by giving more attention to the chewing of their food. In fact, of late, this particular physiological function has received much serious attention, to the great advantage of all—to say nothing of the dentists. But as we contemplate this new masticatory era, we hark back and encounter the long accepted and time-honored dictum, which has never been disputed, that good company and conversation aid digestion. It seems that this ancient decision, borne of the round table, the alehouse, and the "merrie companie," must be reversed in the court of the new gastronomy. When one is engaged with a mouthful of food, he should be unmolested until it is resolved into solution.

Mastication, as a physiological function, has been too much disturbed by the ancient dictum above referred to. Here is the eater conveying a loaded fork of nourishment to his mouth; at the same moment his table companion propounds a question

or utters a statement which demands a response. Witness the gulping down and the responsive sputterings. This is no unusual scene. Of course there is no objection to talking in the intervals of mastication, but this is practically impossible in the atmosphere of so-called table good-fellowship. It is hardly to be expected that your company shall time the working of his mind and conversation to the working, so to speak, of your jaw. That is an utopian dream. It would be straining antiphonal possibilities. The invitation, "Let's go to the Waldorf and hear the newly rich eat!" bears witness to these contentions. Talking and eating mean often munching and gulping, but not mastication.

The company of those who understand us, the company of healthy children, and the company of those who do not demand entertainment from us, are surely not undesirable at meal-time; but society which is pestiferous and which demands talk is subversive to the best interests of the table. The old dining-hall legend, that conversation aids digestion, is presumably false. The notion that lull at the table means that the dinner is not a success at that moment, will not bear the scrutiny of modern physiology any more than it will when two or more, gathered together, are engaged in any other physiological function. The most important thing should have precedence. An ideal conversation at the table would be simple voluntary contributions of pleasant thought which excite no immediate reply from anyone engaged in eating. To ask a chewing guest a question is as rude as to jostle his elbow. An appropriate and modern dining-room motto would be, "Let the full mouth be undisturbed."

"It is not well for man to eat alone" is true only provided his society is agreeable, intelligent, and familiar with the physiological proprieties. Otherwise, he will do better to conduct himself like the lion, and, while he gnaws his bone, devote himself to that function exclusively. When we eat, let us as simple men that are nourished by their food.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

March, 1917.

Annual Death Rate per 1000....	16.6	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	30.5	Population (Est.) 1917	440,000
Annual Death Rate, Males.....	9.4	Annual Death Rate, Females....	7.2
Annual Birth Rate, Males.....	16.3	Annual Birth Rate, Females....	14.2
Death Rate less, Violence.....	15.7	Birth Rate less, Still Born.....	27.5

Deaths recorded	607	Births recorded	1119
Marriages	158		

BIRTHS.

SEX.

Males	594
Females	525

COLOR.

White	1117
Colored	2

REPORTED BY

Physicians	803
Midwives	298
Others	18

NATIVITY OF PARENTS.

Father Mother

Milwaukee	154	195
Wisconsin	326	397
United States	134	113
Germany	120	91
Poland	95	67
Austria	70	60
Bohemia	1	1
Sweden	1	—
Italy	44	41
Roumania	1	1
England	7	8
Holland	1	1
Norway	6	5
Slavonia	6	7
Hungary	50	49
Russia	62	59
Canada	3	5
Greece	7	6
Unknown	20	—
Ocean	1	—
Elsewhere	10	13

BY WARDS.

First	21
Second	26
Third	44
Fourth	29
Fifth	44
Sixth	40
Seventh	54
Eighth	54
Ninth	42
Tenth	27
Eleventh	45
Twelfth	57
Thirteenth	47
Fourteenth	88
Fifteenth	13
Sixteenth	19
Seventeenth	58
Eighteenth	15
Nineteenth	20
Twentieth	63
Twenty-first	55
Twenty-second	40
Twenty-third	27
Twenty-fourth	51
Twenty-fifth	34
Hospitals	106
Pairs of twins	12
Triplets	—
Illegitimate	47
Still Born	28

MARRIAGES REGISTERED.

GROOM.

Oldest	65
Youngest	18
Widowed	12
Divorced	5

BRIDE.

Oldest	54
Youngest	17
Widowed	14
Divorced	7

COLOR.

White	157
Colored	1

COLOR.

White	157
Colored	1

NATIVITY.

	Groom	Bride
Milwaukee	5	4
Wisconsin	75	96
United States	27	17
Germany	12	9
Poland	1	—
Austria	4	2
Bohemia	—	—
Sweden	1	1
Italy	5	4
Roumania	—	—

NATIVITY.

	Groom	Bride
England	3	—
Holland	—	—
Norway	1	1
Slavonia	—	—
Hungary	6	8
Russia	13	14
Canada	1	—
Greece	2	1
Elsewhere	2	1
	158	158

AGE.

GROOM.

Under age	11
21 to 25	54
25 to 35	71
35 to 45	12
45 to 55	5
55 to 65	4
65 to 75	1
Over 75	—

AGE.

BRIDE.

Under age	5
18 to 25	93
25 to 35	43
35 to 45	12
45 to 55	5
55 to 65	—
65 to 75	—
Over 75	—

BY WHOM.

By Judges	20
By Justices	15
By Ministers	123

BY WHOM.

By Judges	20
By Justices	15
By Ministers	123

RESIDENCE.

Outside State	9
Outside City	14
Married outside State.....	17

RESIDENCE.

Outside State	4
Outside City	8

COMMUNICABLE DISEASES.

For the month of March, 1917.

	Last Report	New Cases	Died	Recov- ered	On hand
Scarlet Fever	542	564	8	475	623
Diphtheria	38	50	5	68	15
Small Pox	—	1	—	1	—
Measles	20	112	2	90	40
Whooping Cough	129	177	6	140	160
Typhoid Fever	8	13	4	7	10
Chicken Pox	23	114	—	96	41
Meningitis	—	3	3	—	—
Erysipelas	12	39	5	26	20
Total.....	852	1083	33	883	909
Tuberculosis . . .	2933	95	27	*14	2987

* 11 died out of city. 2 died—not T. B.

Number of fumigations	2
Cubic feet fumigated	11,000
Fumigators used	11

FERD. MACK, JR.,
Assistant Chief Inspector.

WORK DONE BY SANITARY INSPECTORS.

No. of orders served.....	573	No. houses disinfected	498
No. of complaints received.....	705	No. calls by ambulance.....	89
No. of inspections made.....	5903	No. visits to schools.....	53
No. of cultures del.and col.....	180	No. funerals attended.....	13
No. visits to quarant. houses....	1390	No. arrests	10
houses placarded	676		

DR. T. F. THOMSON,
Chief Sanitary Inspector.

DEATHS.

According to Cause, Annual Rate per 1000, and Deaths in Public Institutions.

Months.....	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.
Total Deaths.....	565	534	495	367	458	375	403	419	395	470	534	527	607
Annual Death Rate.....	15.76	14.88	13.82	10.24	12.78	10.46	11.24	11.69	11.02	13.12	14.56	14.37	16.6
Typhoid Fever.....	21	7	4	4	3	1	5	3	2	2	1	6	2
Measles.....	35	24	7	1	1	0	0	0	1	0	2	0	2
Scarlet Fever.....	5	9	5	4	4	0	1	3	2	3	4	12	7
Whooping Cough.....	2	2	2	0	2	1	6	2	1	1	2	4	5
Diphtheria.....	6	9	7	3	3	0	6	11	9	10	15	7	5
Influenza.....	4	0	1	0	1	1	0	0	2	1	2	7	4
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Phthisis.....	39	29	31	36	30	16	19	22	22	31	28	28	30
Cancer.....	22	26	31	34	45	34	28	41	33	28	31	27	38
Meningitis.....	5	6	10	6	3	7	3	1	4	4	5	4	6
Apoplexy.....	22	30	31	18	19	16	18	34	24	22	20	24	27
Org. Heart Disease.....	34	49	35	32	35	25	32	40	34	42	44	32	48
Bronchitis.....	16	16	21	13	8	5	4	8	5	16	16	27	16
Pneumonia.....	103	98	86	30	19	27	21	37	33	78	117	125	147
Diarrhoea.....	15	16	12	8	13	26	51	16	14	17	14	16	29
Nephritis.....	25	19	28	25	20	24	22	28	27	32	34	25	35
Congenital Debility.....	49	37	27	23	30	24	31	16	35	31	28	26	21
Senility.....	12	8	10	9	10	6	6	6	9	5	16	15	16
Violence.....	17	23	31	25	93	40	24	22	28	25	28	26	26
Suicides.....	5	6	3	8	9	3	7	7	9	4	7	4	6
Homicides.....	0	1	3	1	0	0	1	0	0	1	3	0	0
Under 30 days.....	62	48	39	34	44	36	40	42	51	62	51	55	57
Bet. 30 days and 1 year.....	77	83	72	26	35	55	68	37	31	29	52	68	83
Bet. 1 and 5 years.....	83	78	49	26	25	30	35	31	18	35	35	34	57
5 to 60 years.....	218	187	211	171	217	162	147	167	169	212	223	205	213
Over 60 years.....	125	138	124	110	137	92	113	142	126	132	173	165	197
Age at death—all ages.....	30.8	32.	34.6	39.5	40.9	35.2	35.4	40.6	40.6	38.	41.2	35.8	37.6
Age at death—over 5.....	50.5	52.4	50.5	51.6	52.5	51.	53.5	55.	52.8	51.8	55.5	53.6	54.7
Public Institutions.....	81	71	117	78	108	89	57	85	106	107	108	123	95

ORDINANCES YOU SHOULD KNOW

THROWING FILTH, RUBBISH OR NAUSEOUS SUBSTANCES ON STREETS, ETC.

Section 865. It is hereby made unlawful for any person, firm or corporation, or for any officer, member, agent servant, or employe of any firm or corporation to place, throw or leave any slops, dirty water or other liquid offensive smell, or otherwise nauseous or unwholesome, or any dead carcass, carrion, meat, fish, entrails, manure or other nauseous or unwholesome matter or substance, or any rubbish, ashes, paper, dirt, stones, bricks, manure, tin cans, boxes, barrels, or other substances whatsoever, or to circulate or distribute any circular, hand-bills, cards, posters, dodgers or other printed or advertising matter, in or upon any sidewalk, street, alley, wharf, boat landing, dock or other public place, park or ground within the city of Milwaukee.

THE CHINESE PLAN of paying doctors is correct in principle and in this regard we occidentals have the cart before the horse. In China the doctor is paid for keeping his patients well and his pay stops when they get sick. This is the practical application of our universally admitted adage that—an ounce of prevention is worth a pound of cure. We generally entertain the delusion that we may continue to indulge our appetites and passions until disease appears, and then oust the disease with a few tablets or pills. When we rise out of this delusion we resort to prevention and not before.

From the Indiana State Board of Health.

Clean-Up and Paint-Up

Clean Habits, Clean Homes,
A Clean City, Mean Better
Health and Happiness.

Getting rid of rubbish means a
lessened fire risk for your and
your Neighbor's Home.

Do your share to keep your city
safe and clean.

For Garbage and Rubbish
Collection—Call Complaint
Clerk, Department of Public
Works.

Telephone Main 3715

MILWAUKEE HEALTH DEPT.
CITY HALL

614.09
M64 b

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

GEORGE C. RUHLAND,
Commissioner of Health, *Director*.

JOHN L. MEYER,
Deputy Commissioner, *Editor*.

MAY, 1917.

Vol. 7, No. 5.

Wanted—

Public sentiment that
values children's lives
as dearly as those of
animals.

"SECOND LINE OF DEFENSE" NUMBER

Bulletin of the Health Department, May 1917

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MRS. EDITH BAILEY,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

CHILD WELFARE DIVISION.

Telephone, Main 3715.

Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

The division handles matters relating to the physical welfare of children under two years of age and to the physical welfare of mothers and prospective mothers. Its nurses give instructions in the care of infants, but are "visiting nurses" only—they do not undertake bedside nursing or assist either during or after confinement except in an advisory way.

The division also arranges for the care of illegitimate children; supervises midwives; supervises day nurseries; supervises so-called Baby Farms; supervises Lying-in-Hospitals and Maternity Homes; conducts mothers' classes and conducts "Little Mothers'" classes for girls.

Four Child Welfare stations are operated, as follows:

Third Ward School	Jackson and Detroit Sts.
Thursday mornings, 9 A. M. to 10 A. M.	
Forest Home Ave. School	Tenth and Forest Home Aves.
Wednesday mornings, 9 A. M. to 10 A. M.	
Fifth Avenue School	Fifth and Hayes
Friday mornings, 9 A. M. to 10 A. M.	
Abraham Lincoln House	Ninth and Sherman Sts.
Wednesday afternoons, 1:30 P. M. to 3 P. M.	

During the summer months, an Infants' Fresh Air Pavilion is operated at Waterworks Park.

Visiting Hours, 2 to 4 P. M.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

MAY 1917

BLESSINGS IN DISGUISE.

(By GEORGE C. RUHLAND, M. D. Commissioner of Health.)

The food shortage in Europe, which has resulted in that less food and food of plainer quality is taken, is said to have greatly benefited the health of the peoples in these countries.

Scientists have long preached the desirability and necessity of the simple life, and warned against the dangers of over-eating.

Their warning, however, fell mostly upon deaf ears, as a large number of prosperous health resorts testify, where people suffering from the effects of overindulgence of the good things of the table are being slowly re-educated in the simpler and saner methods of eating.

It is to be hoped that the lesson learned under the present painful conditions, may endure, and that especially Americans, whose habits in eating are notoriously bad, may profit thereby.

Food taken in excess of the actual needs not only means economic waste, but means in addition thereto, an extra burden upon the digestive system, which sooner or later breaks down under this strain, leaving more or less permanent ill health as the result.

The back yard and vacant lot gardening plan; which is rapidly developing as a consequence of the high cost of living, unquestionably is good and profitable in itself. Perhaps—and let us hope that it will do more than produce cabbages and potatoes—it will also demonstrate the benefit of physical exercises in the out-of-doors, which we are so very much in need of.

SING A SONG OF CLEAN-UP.

Sing a song of clean-up—

What a dirty spot!

Four-and-twenty kinds of filth

In every vacant lot!

When the breezes bluster

See the dust clouds fly!

That's the way to scatter
germs

On every passer-by.

But dad has got his rake and
hoe

And mother's got her broom

The kids are helping clean the
lots—

We've got some flowers to
bloom.

Fire department's helping us—

"Streets and alleys," too:

That's the way to make a town
Fit for me and you.

—*Katherine Field White.*

Editorial and Comment.

By JOHN L. MEYER. Deputy Com'r of Health.

BACKING UP THE FIRST LINE:

The United States is no longer on the bleachers, looking on at the world scrimmage. A half-million of its men are called to form a great, powerful first line of defense. Other half-millions may follow.

Back of that first line there must be a sustaining force that is to dare and do—without which the first line cannot stand for long. This is largely Womanhood's opportunity.

Carelessness "on the second line" will become a crime. Mere emotionalism will be worse than vain. Indifference cannot be tolerated.

Women spend 80 per cent of men's incomes. Of this, 40 per cent goes for food. Most of the remaining 60 per cent also goes toward conserving home conditions and health. Here are the elements of a regular job, even in times of peace.

To keep home conditions as nearly normal as possible war days will be the unbounded task for the "second line." It is a task that calls for calm wisdom and trained ability.

Milwaukee's women, however, will be found neither careless nor "slacking." Already the social service of the city has

accomplished remarkable strides to build and hold firm that indispensable "second line." Not the least—and, at the same time, characteristic—of the ways in which Milwaukee is taking hold, is the perfection of the Red Cross division. More close to the home, perhaps, comes the rapid organization of classes for training in local social service and public health work. The state university extension division, more particularly the Wisconsin Anti-Tuberculosis association; the Milwaukee Health department, charity organizations, medical experts and many others have not waited to be called. Duty has been anticipated.

There is forming a "second line" army for local field work of which Milwaukee should have reason to be proud. Enlist!

Flag flying stirs the heart. But *Service* is the need of the hour! Prepare. The ways and means for ripe training are readily available.



HEALTHIGRAMS



VITAL STATISTICS:

Spring Poets are born—and no law can prevent it.

NOISE:

* * *

The whistle makes the most noise, but does it help to pull the train?

* * *

TODAY:

Today is the tomorrow that you worried about yesterday.

* * *

CLEAN-UP:

"Robert, dear, how do you suppose those dozens and dozens of empty bottles ever got into the cellar?"

"Why, I really don't know, my dear. I never bought an empty bottle in all my life."

* * *

9999.

Mother: "Don't ask so many questions, child! Curiosity killed the cat."

Willie: "Well, ma, what did the cat want to know?"

The Fly Pest—NOW Is The Time.

The early fly's the one to swat,
It comes before the weather's hot,
And sits around and wipes its legs,
And lays about ten million eggs;
And every egg will bring a fly
To do us damage, by and by.

Clean up the yard. Remove manure. The May fly is the possible parent of millions.

It doesn't pay to swat the fly unless you destroy his breeding places.

Two thirds of a pound of borax with three gallons of water to ten cubic feet of manure will prevent fly breeding.

Screening the manure box is a good precautionary measure. A manure box has no brains, however. It will not keep itself closed.

Cleaning up the yard is as much a matter of sound sense as life insurance. When you deprive the fly of his breeding place, see that he gets no food. This is best done by attention to the garbage can.

One thousand babies were carefully watched over during a recent summer in New York City. In the dirty homes twice as many babies had diarrhoea as in the clean homes. Among the babies exposed to flies, twice as many babies had diarrhoea as among the babies protected by netting.

Flies come to your home straight from the manure pile, the water closet, privy or the spittoon, covered with filth and germs. They walk on your bread, wash their dirty feet in the baby's milk and wipe them in the sugar bowl.

The Patent Medicine Faker.

He deals in falsehood, relies on ignorance, capitalizes misfortune, teaches despair for his own profit and resorts to blackmail as a useful collection agency. He prostitutes the noble art of healing to lure in trusting victims.—*Cleveland News*.

PHYSICALLY UNFIT VOLUNTEERS.

Fully 50 Per Cent Of War Volunteers Rejected For Health Impairments And Physical Defects, According To Recruiting Office Statistics.

The American people are now getting a striking demonstration of the physical unpreparedness of the average young man.

Reports from all over the country indicate that fully 50% of war volunteers are rejected for health impairments and physical defects. Prominent among the latter is poor physique.

DENIALS REFUTED:

Many editorial writers have strenuously denied the assertion made by conservationists in recent years that the physically low-powered group in our population was excessive and apparently increasing. They now have an opportunity to learn from the official records.

A year ago 128,517 National Guardsmen were called to the southern border. They had already been medically selected under the army regulations by the militia surgeons when they enlisted, but a re-examination by the regular army doctors resulted in sending home 23,721, or 18% of them.

AN ANALYSIS:

The nature of their physical deficiencies may be noted in the following table based on a substantial number of these rejections.

Poor physique	31%
Defective vision	13%
Heart and lungs.....	13%
Defective feet	8%
Hernia	7%
Venereal disease	5%
Defective teeth	5%
Amputations and deformities.....	4%
Defective hearing	2%
Miscellaneous causes	12%

The percentage of impairment found corresponds very closely with the records of the physical examinations of a large number of average men working in mercantile houses, factories and industrial plants.

A BIG LESSON:

These rejected volunteers belong to America's vast army of physically low-powered young men who are either burdened with under-developed bodies or specific health impairments, or both.

The nation and the race is vitally interested in increasing the resisting power of these men to fatigue and disease. Every one of them should have from six months to one year of intensive physical education and training.

A national vitality commission of scientists should be appointed to study and report upon the entire subject of the physical trend of our people. Our nation has no asset of greater value than the lives of the people who compose it.—*Equitable Public Bulletin.*

The Housing Ordinance.

Few ordinances introduced in the common council of Milwaukee in recent times, have been put before that body with more extensive and detailed evidence of a need for the legislation than the Lodging House ordinance. The survey of housing conditions in Milwaukee, made last year, found that approximately twelve per cent of the city's population live under conditions in which a housing problem must be recognized. The selfsame districts which offer the problem furnished one-fourth of all the deaths from tuberculosis, and twenty-one per cent of the entire mortality under five years of age. The requirement that the number of lodgers or boarders shall be dependent upon a specified minimum or air space, would seem to be the logical, effective way of providing necessary relief. Four hundred cubic feet of air space per person is certainly not in excess of a reasonable minimum, if it is desired to meet a sane requirement for proper housing.

WILL YOU HELP SAFEGUARD PUBLIC?

Big 1917 Crop Of Nostrum Ads, Self-Doping Schemes And "Medical Books", Demands Unselfish And Prompt Vigilance.—Health Department
Will Appreciate Timely Co-operation.

The advent of spring and summer this year seems to have brought Milwaukee more than the ordinary crop of nostrum advertisements, self-doping schemes and "medical book" solicitations that the season usually develops. There has been a tremendous development of public interest in matters of sanitation and of economic preparation, for one thing, on account of the international situation. That certain brands of "conscience" among the nostrum manufacturers and inventors of self-doping schemes are not above taking advantage of such a fruitful situation, is a thing to be regretted but one that must be faced.

As never before, public co-operation is necessary at this time for an effective handling of such matters by those charged with the safeguarding of the public health. This co-operation is obviously needed both in keeping officials posted, and in taking heed of warnings concerning doubtful (if not worse) propositions that are foisted upon the public, all too often in surreptitious ways.

Can there be anything more necessary, especially in these times, than safeguarding the public health? Can anyone, particularly if influential in his community, do anything more public spirited than to bring to the attention of the authorities those certain activities fraught with doubt, that are likely to affect priceless health—and, usually, the pocketbooks of those least able to afford being picked?

"ON THE JOB":

Appreciation is certainly due in his community to M. J. W. Phillips, instructor in Science at the West Allis High School, who when pupils recently brought to his attention questions concerning a medical book selling plan that was being worked in the vicinity, took energetic and prompt steps to make in-

quiry. His spirit is well illustrated by his statement: "I will appreciate any authentic information you can give me, so I may help to protect the public if they need protection along this line." Mr. Phillips' inquiry letter tells the story of his particular problem:

"A few weeks ago a number of women appeared in the city representing themselves as graduate nurses with the American Red Cross Society. They visited a number of homes and sold the book, 'Library' of Health for which \$2.40 was paid down and the balance of \$10 was to be paid in installments according to a contract signed by the purchaser. This contract the purchaser does not hold. When the book was delivered and examined it was found to be American Health Society instead of American Red Cross Society. These salesladies seemed to convey the impression that it was the Red Cross and in these stirring times they led a number to take the book. Then along comes a number of circular letters from a Western Distributing Company of Chicago to collect the \$10. The purchasers do not want the book and offered to return it and have the \$2.40 refunded, but this distributing company claims they hold a binding contract and will force collection, etc. Furthermore one of these saleswomen stated to one of the purchasers that she had called upon the family physician of this purchaser and that he had endorsed the book. Upon investigation it was found that this was not true. Also this doctor stated that the teaching in the book was fallacious."

Mr. Phillips is assured the co-operation of the Health department and other authorities in looking after matters of public interest. "May his tribe increase."

AN "ADVERTISEMENT":

Recently the health department discovered that agents operating in Milwaukee were making use of a folder for advertising purposes, and in which some statements of the Health department, published in local papers, were printed. These statements were made in the press in circumstances and on subjects entirely different and foreign to the purposes of the folder. There was absolutely nothing in common, of course. The reader is left to form his own opinion.

Good Health is the real essence of Good Looks.

* * *

And while we are at it, how about a good cleaning for the refrigerator?

HOSPITAL PROJECT TO FILL NEED.

Conference Of Experts Goes On Record At Request Of City And County Committee. — Summarizes Demand Of Situation And Suggests Plan For Meeting It.

Pursuant to a request of the City and County Committee on the Question of combining the Emergency and County Hospitals, a conference composed of committees representing the City and County Medical Societies, a member of the Board of Administration of Milwaukee County, a member of the Board of Trustees of the Emergency Hospital, physicians of the county institutions, Dr. Hoyt E. Dearholt of the Wisconsin Anti-Tuberculosis Association, Dr. John R. McDill, and the Commissioner of Health, was held on April 30, to consider the problem of re-locating the Emergency Hospital, and merging this institution with a branch of the County Hospital, to be located in the city of Milwaukee.

After a careful consideration of the problem, the conference adopted the following resolution:

WHEREAS, it appears that the number of sick in Milwaukee each day is conservatively placed at 40,000, and

WHEREAS, it has been found that fully one-half of these sick go without any medical aid or advice, and

WHEREAS, the monetary loss in wages alone from such sickness averages more than \$3,000,000 annually, and

WHEREAS, it is well known that neglect of such illness means increased economic loss to the community from resultant chronic illness, disability, and premature death, and

WHEREAS, it appears that these conditions exist largely because of unpreparedness in, and inadequacy of the hospital and dispensary facilities of the city of Milwaukee—these facilities being much less than in any other city of the size of Milwaukee, and

WHEREAS, it is to be foreseen that under the present conditions of war the needs for hospital and dispensary facilities will become even more acute, **therefore be it**

RESOLVED, that this conference urge the immediate construction of a city unit of the County Hospital of not less than five hundred beds, the combining of such a hospital unit with the City Emergency Hospital, and

RESOLVED, that such a hospital be located within an area bounded on the east by Lake Michigan, Twenty-seventh St. on the west, Vliet St. on the north, and Mineral St. on the south, and

RESOLVED, that such hospital unit maintain a dispensary or out-patient department, a department for social relief, an ambulance service, and that it be equipped for the care of all cases requiring immediate surgical, medical, obstetrical, and psychopathic care, and

RESOLVED, that patients be admitted at such a hospital both as charity as well as pay patients, the fee for the latter not to exceed the actual cost for the care of the patient.

Respectfully,

Signed for the Conference,

L. F. JERMAIN, M. D.

HOYT E. DEARHOLT, M. D.

GEO. C. RUHLAND, M. D., Chairman.

VALUE OF HEALTH IN A NEW LIGHT.

America's Womanhood Will Profit For All Times By Its Loyal Work Of War Preparation And Burden Of Added Responsibility.

"Women of America, rushing impulsively, loyally, into the work of preparing for war, are going to profit by it more than they realize," says an article on "What War May Mean to Women," in the current number of *The Crusader*. "Eager to give, they are going to get, and get in large measure. And the result will be better health conditions in their own homes and a keener appreciation of the value of health for their own children and for their neighbors' children."

An extremely interesting report has come from England telling how nervousness and other illnesses to which many women had been subject for years were being cured because of the new and broader life led today in the warring country.

"Women who used to live shut-in and restricted lives and who were apt to be ailing have now taken up regular and often very hard work. Their health is improved to a remarkable degree; often they have not known a day of illness since getting out from their narrow environment into the world of effort and interest in which they now live."

It's the spring fly that makes the summer pest.

SEASON OF COSMETICS IS WITH US.

Glaring Headlines Of Disguised Advertisements Proclaim Again The Universal Panaceas For All That Ails Us, At "Sucker Prices."

FRECKLES! scream the headlines of disguised advertisements in scores of newspapers, these days. **BE BEAUTIFUL**, advise others, at so much per. In addition, one bottle of Punk-adora will cure you of fainting spells, leprosy, falling of the hair, cold feet, heart disease, cramps, hangnails, scrofula and warts. If you don't believe it, read the advertisements.

As a wise man said, "You don't have to keep a bee to get stung." Just pay a stiff price for some oriental cream, or magic beautifier.

The Journal of the American Medical Association, for example, takes up "Dr. T. Felix Gouraud's" stuff of some such name. This is quite prominent among the current advertisements locally.

EXPENSIVE CALOMEL:

One analysis, by a state chemist in New Hampshire, said that it consisted of "approximately one-half ounce of calomel suspended in a short half-pint of water." According to the Journal, some of the claims made for this mixture are: "Removes tan, pimples, freckles, moth patches, rash and skin diseases and every blemish on beauty, and defies detection." A Connecticut chemist asserted that the amount of calomel in a bottle of this substance can be bought at retail for about six cents. The Journal finds that an eight-ounce bottle sells for 98 cents.

And so it goes. The strenuous efforts for business being made just now, when warmer weather is in the offing, by the patent medicine, "experts" in the cosmetic and beautification line, bring to mind a report of the U. S. government Public Health Service, "Cosmetics As Drugs." Here is one statement: "Of the many and varied abuses of drug products there is none in which fraud, deception and a wanton disregard for human

health and even life are so clearly evidenced as in connection with the manufacture, sale and use of so-called 'cosmetics'."

"FEEDING" THE SKIN:

"The chief objections to these products," says Dr. Wiley about some preparations, in his "1001 Tests," "are the altogether ridiculous claims made for them." He then cites instances. "It has been established in the courts in connection with a case brought against Sartoin, a so-called skin food, that this claim ("skin food") is not permissible and that you cannot feed the skin by external applications. This particular product, incidentally, consisted of epsom salts. Strange that the same preparation should reduce the weight under one label and 'feed the tissues' under another. 'Madame Yale's skin food' was 76 per cent vaseline, mixed with fixed oil and zinc oxide, perfumed and colored pink. The courts declared that the statement, 'it is soothing in its effect on the skin, healing as a magic balm and fattening in its qualities' was false and misleading in that the said drug is simply an ordinary ointment."

Whether or not the court pointed out the beautiful prices of the article as compared with its ingredients, Dr. Wiley does not say.

Here are a few results of tests which Dr. Wiley publishes:

RESULTS OF TESTS:

Peredix Cream—Soap water and starch; no peroxide found. Claims unwarranted.

Creme de Meridor—Impossible claims as to stimulating and nourishing the skin, and overcoming sallowness, freckles, eruptions, etc.

Hubert's Malvina—One of the dangerous freckle creams, contains ammoniated mercury (a poisonous salt), mineral oil and fat; is offered for salt rheum, ring worm, etc., as well as for freckles and falling hair.

Magnolia Balm—Claims to be a secret aid to beauty, store the bloom of youth to faded cheeks, resist the ravages of time, eradicate freckles, eruptions, etc.; could do none of these things obviously.

Stillman's Freckle Cream—Another of the objectionable freckle creams containing ammoniated mercury.

Creme Tokalon—Impossible claims, such as possesses astonishing properties for quickly restoring the appearance of youth.

DEATH-DEALING MIXTURES:

The U. S. Public Health service warns particularly against the "common occurrence of mercuric chloride or corrosive sublimate in the moth and freckle lotions sold at the present time."

"Robinson," continues the report and referring to extracts from the Journal of the American Medical Association, "reports two cases of lead intoxication due to skin absorption from a cosmetic. He expresses the belief that many cases of general nervous debility, some of insanity, and perhaps some of paralysis are caused by the use of cosmetics containing lead."

After giving many more examples of the dangers of so-called cosmetics and pointing out the ridiculous prices paid for some of the concoctions, the authorities also point out this: "Cosmetics as ordinarily used, tend to clog the pores or irritate the skin and are thus likely to interfere with the normal, healthy action of that organ."

South Side Dispensary Is Moved.

The South Side Dispensary of the Milwaukee Health Department, Tuberculosis division, has been removed to the Woolworth building, Fifth avenue and Mitchell streets. Clinics will be held every Thursday evening from 7 to 9 o'clock for adults. The hours for children are from 9 to 11 o'clock every Saturday. The division also holds the following regular clinics:

Eighth Floor, City Hall: Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock, for adults. Saturday mornings, from 9 to 12 o'clock, for children.

North Side Dispensary—Fourth street and Reservoir avenue: Wednesday mornings, from 10 to 12 o'clock.

Service at these clinics is rendered without charge and any person may visit the clinics and consult with the physicians in charge.

WHY PRESERVE THE "FIRST TEETH?"

Failure To Understand Importance Of Initial Molars Often Leads To
Serious Ailments In Later Life Of Men And Women.

Many mothers, from a sense of economy, refuse to bother about the "first teeth" of their children. "They'll soon get their real teeth, so why go to any expense about this," is the thought.

As a matter of fact the temporary teeth are undeniably important. First of all, the comfort and health of the child depends greatly on the condition in which they are kept. These teeth are the masticatory organs of the child from two to eleven years. Therefore, if they are allowed to decay, food cannot be properly masticated. The child, being improperly nourished, cannot develop physically as it should. When mastication is impaired and food passes through a filthy mouth it becomes burdened with numerous colonies of dangerous germs. Is it any wonder that such children are sickly, of lowered resistance and often members of the "mentally deficient" class in school?

The temporary teeth play an important part in the development of the jaws. The little arch must develop sufficiently. The result of neglect is under-developed arches and a crowded, irregular set of teeth.

No child should ever be allowed to suck its thumb, or should ever be given rubber pacifiers. Habits such as these cause high, narrow and protruding upper arches.

John Mahkorn Dies.

John Mahkorn, a Sanitary Inspector of the Milwaukee Health Department, passed away April 27. He was appointed to the Health Department June 3, 1903. His earnest, conscientious service and manly co-operation will be missed. Fellow workers joined in the last rites and honors. O. Klein, H. Dolge, J. E. Christie, F. C. Wachs, E. F. Voelz and Fred Mack, Jr., all of the division of Sanitary Inspection, acted as pallbearers.

DOES "ANYTHING GO" IN WAR TIMES?

Eastern Bureau Of Municipal Research Reads A Stern Lesson To Those Invested
With The Care Of Public Welfare During National Crisis.

If ever citizens are conscious of the government over them it is when they are face to face with war. In ordinary times of peace the great mass of citizens take little heed of the fact that it is government that protects us from violence and accidents, that it is government that very largely looks after our health, that it is government that educates our children, that government is the greatest constructive social agency in the community.

But suddenly war tears the veil of indifference from our eyes and we see government as it actually is, always a part of our very existence. Government may regulate what we shall wear, what we shall eat, where we shall go, it can control our every action. It becomes in war times the biggest fact in our lives.

If sanitation was important during peace, it is immensely more important during a war.

If education and the advancement of science were worth while last month, how much more so are they now when our very lives depend upon knowing how to control the forces of nature!

If it were worth while to save babies in ordinary times, how much more important it is to save them in war time!

If scientific methods of employment and purchase of supplies were necessary to meet the normal demands on government, how much more necessary are they now that we are in the conflict!

If good methods in the management and control of the governmental finances were desirable in times of peace, they are indispensable in times of war!

So, while at first thought, sloppy, haphazard ways might seem justified on account of the unusual pressure suddenly brought to bear upon our machinery of government, reflection

shows us that now of all times are precision, expertness, careful planning, improvements in all phases of governmental work most supremely important.—*Philadelphia Bureau of Municipal Research.*

AS WARMER DAYS APPROACH.

REMEMBER THAT CHILDREN NEED FRESH AIR IN THE SUMMERTIME, AND OUTDOOR LIFE IS ONE OF THE BEST WAYS OF AVOIDING DISEASE.

Give your children plain, wholesome food, including plenty of milk and vegetables.

Keep the milk clean, covered and cold.

Do not allow the milk or any other food to be exposed where flies may alight upon it.

Wash well all food that is to be eaten raw.

Anticipating The "Hay Fever Season".

The Milwaukee Health Department is sponsor for a proposed city ordinance, whose adoption will be a source of a somewhat more pleasurable anticipation of the "hay fever season" for many residents. The purpose is to prevent the pollenization of hay fever grasses and weeds. In order to prevent such pollenization, none of the following grasses, and no weeds of any kind, shall be permitted to grow or stand more than one foot high on any premises in the city: Meadow grass (*Poa annua*), Bull grass (*Paspalum Vasyanum*), Bermuda grass (*Capriola dactylon*), Smut grass (*Sporabulus angustus*), Johnson grass (*Andropogon halapense*), Feather grass (*Leptochloa filiformis*), Fox-tail grass (*Chaetochloa glauca*) and Cockspur grass (*Panicum crus-galli*).

The penalty for violation is to be not less than \$1, up to \$25 for first offenses, and \$5 to \$25 for subsequent offenses, or the equivalent in jail. Owners, tenants, occupants and agents of properties are held responsible.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

April, 1917.

Annual Death Rate per 1000...	15.57	Population U. S. Census.....	373,857
Annual Birth Rate per 1000....	24.19	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	9.1	Annual Death Rate, Females....	6.4
Annual Birth Rate, Males.....	12.3	Annual Birth Rate, Females....	11.9
Death Rate less, Violence.....	14.6	Birth Rate less, Still Born.....	23.3

Deaths recorded	571	Births recorded	887
Marriages	398		

BIRTHS.

SEX.

Males	450
Females	437

COLOR.

White	886
Colored	1

REPORTED BY

Physicians	634
Midwives	224
Others	29

NATIVITY OF PARENTS.

Father Mother

Milwaukee	125	143
Wisconsin	257	325
United States	123	106
Germany	110	80
Poland	40	37
Austria	57	50
Bohemia	2	2
Sweden	1	1
Italy	27	28
Roumania	2	1
England	6	4
Holland	1	1
Norway	5	4
Slavonia	3	3
Hungary	38	35
Poland	52	42
Canada	2	4
Greece	13	9
Unknown	13	—
Ocean	—	—
Elsewhere	10	12

BY WARDS.

First	33
Second	34
Third	28
Fourth	23
Fifth	39
Sixth	26
Seventh	29
Eighth	40
Ninth	43
Tenth	27
Eleventh	37
Twelfth	35
Thirteenth	29
Fourteenth	51
Fifteenth	11
Sixteenth	11
Seventeenth	31
Eighteenth	21
Nineteenth	21
Twentieth	45
Twenty-first	36
Twenty-second	34
Twenty-third	39
Twenty-fourth	36
Twenty-fifth	27
Hospitals	101
Pairs of twins	12
Triplets	—
Illegitimate	26
Still Born	31

MARRIAGES REGISTERED.

GROOM.

Oldest	81
Youngest	18
Widowed	21
Divorced	10

COLOR.

White	397
Colored	1

NATIVITY.

	Groom	Bride
Milwaukee	8	14
Wisconsin	245	268
United States	48	34
Germany	24	24
Poland	1	2
Austria	18	16
Bohemia	—	—
Sweden	1	—
Italy	9	6
Roumania	—	—

AGE.

GROOM.

Under age	32
21 to 25	187
25 to 35	139
35 to 45	22
45 to 55	10
55 to 65	6
65 to 75	2
Over 75	—

BY WHOM.

By Judges	42
By Justices	28
By Ministers	328

RESIDENCE.

Outside State	14
Outside City	43
Married outside State.....	8

BRIDE.

Oldest	66
Youngest	15
Widowed	24
Divorced	14

COLOR.

White	397
Colored	1

NATIVITY.

	Groom	Bride
England	3	2
Holland	1	—
Norway	—	—
Slavonia	—	—
Hungary	5	7
Russia	19	17
Canada	2	1
Greece	3	—
Elsewhere	10	4
	398	398

AGE.

BRIDE.

Under age	11
18 to 25	281
25 to 35	80
35 to 45	13
45 to 55	10
55 to 65	2
65 to 75	1
Over 75	—

BY WHOM.

By Judges	42
By Justices	28
By Ministers	328

RESIDENCE.

Outside State	8
Outside City	32

COMMUNICABLE DISEASES.

For the month of April, 1917.

	Last Report	New Cases	Died	Recov- ered	On hand
Scarlet Fever	623	441	10	588	466
Diphtheria	15	53	10	38	20
Small Pox	—	4	—	1	3
Measles	40	135	—	103	72
Whooping Cough	160	167	10	113	206
Typhoid Fever	10	13	4	9	10
Chicken Pox	41	69	—	78	32
Meningitis	—	6	9	—	2
Erysipelas	20	23	3	31	10
Total.....	909	911	46	961	821
Tuberculosis	2987	98	36	*20	3032

* 18 died out of city.

Number of fumigations	6
Cubic feet fumigated	35,000
Fumigators used	35

FERD. MACK, JR.,
Assistant Chief Inspector.

WORK DONE BY SANITARY INSPECTORS.

No. of orders served.....	1396	No. houses disinfected.....	563
No. of complaints received....	1500	No. calls by ambulance.....	89
No. of inspections made.....	5328	No. visits to schools.....	14
No. of cultures del. and uol....	129	No. funerals attended.....	11
No. visits to quarant. houses...	1300	No. arrests	6
1 houses placarded.....	535		

DR. T. F. THOMSON,
Chief Sanitary Inspector.

DEATHS.

According to Cause, Annual Rate per 1000, and Deaths in Public Institutions.

Months.....	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.
Total Deaths.....	534	495	367	458	375	403	419	395	470	534	527	635	571
Annual Death Rate.....	14.88	13.82	10.24	12.78	10.46	11.24	11.69	11.02	13.12	14.56	14.37	17.31	15.57
Typhoid Fever.....	7	4	4	3	1	5	3	2	2	1	6	2	4
Measles.....	24	7	1	1	0	0	0	1	0	2	0	2	0
Scarlet Fever.....	9	5	4	4	0	1	3	2	3	4	12	7	10
Whooping Cough.....	2	2	0	2	1	6	2	1	1	2	4	5	10
Diphtheria.....	9	7	3	3	0	6	11	9	10	15	7	5	10
Influenza.....	0	1	0	1	1	0	0	2	1	2	7	4	1
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Phthisis.....	29	31	36	30	16	19	22	22	31	28	28	30	36
Cancer.....	26	31	34	45	34	28	41	33	28	31	27	38	25
Meningitis.....	6	10	6	3	7	3	1	4	4	5	4	6	9
Apoplexy.....	30	31	18	19	16	18	34	24	22	20	24	27	28
Org. Heart Disease.....	49	35	32	35	25	32	40	34	42	44	32	48	46
Bronchitis.....	16	21	13	8	5	4	8	5	16	16	27	16	15
Pneumonia.....	98	86	30	19	27	21	37	33	78	117	125	147	116
Diarrhoea—Under 2.....	16	12	8	13	36	51	16	14	17	14	16	20	21
Nephritis.....	19	28	25	20	24	22	28	27	32	34	25	35	26
Congenital Debility.....	37	27	23	30	24	31	16	35	31	28	26	21	31
Senility.....	8	10	9	10	6	6	6	9	5	16	15	16	5
Violence.....	23	31	25	93	40	24	22	28	25	28	26	26	35
Suicides.....	6	3	8	9	3	7	7	9	4	7	4	6	8
Homicides.....	1	3	1	0	0	1	0	0	1	3	0	0	3
Under 30 days.....	48	39	34	44	36	40	42	51	62	51	55	57	53
Bet. 30 days and 1 year.....	83	72	26	35	55	68	37	31	29	52	68	83	69
Bet. 1 and 5 years.....	78	49	26	25	30	35	31	18	35	35	34	57	50
5 to 60 years.....	187	211	171	217	162	147	167	169	212	223	205	213	248
Over 60 years.....	138	124	110	137	92	113	142	126	132	173	165	197	151
Age at death—all ages.....	32.	34.6	39.5	40.9	35.2	35.4	40.6	40.6	38.	41.2	35.8	37.6	35.5
Age at death—over 5.....	52.4	50.5	51.6	52.5	51.	53.5	55.	52.8	51.8	55.5	53.6	54.7	50.5
Public Institutions.....	71	117	78	108	89	57	85	106	107	108	123	95	135

“THE Public Health is the foundation upon which rests the happiness of the people and welfare of the nation. The care of the Public Health is the first duty of the statesmen.”—*Disraeli*.

ORDINANCES YOU SHOULD KNOW

Section 863. All garbage boxes or cans hereafter to be provided (used) in the City of Milwaukee shall be metal or metal lined and water-tight, with a fly-tight and water-tight metal cover, and (such boxes) shall have a capacity of at least ten gallons for each family, resident upon the premises; provided that wooden receptacles of similar capacity, that are water-tight and are provided with a water-tight cover, may be used during the months beginning December 1 and ending March 1.

Garbage boxes or cans must be provided by the owner of the property in every case where more than one family is resident upon the premises. Garbage boxes or cans must be provided by the occupants in every case where one family only is resident upon the premises. Garbage boxes or cans shall be placed at a point on the premises most accessible to the person collecting the garbage and offal.

The word “premises,” as used in this section, shall mean parcel of land, whether composed of one or more city lots, upon which any building or group of buildings is located, and it shall expressly apply when more than one building is located upon a lot or lots under a single ownership or management.

The Housewife's Apron a National Uniform.

By **D. S. HOUSTEN**, Secretary of
Agriculture of the U. S.

"Every woman can render important service to the nation in its present emergency. She need not leave her home or abandon her home duties to help the armed forces.

"She can help feed and clothe our armies and help to supply food to those beyond the seas by practicing effective thrift in her own household.

"While all honor is due to the women who leave their homes to nurse and care for those wounded in battle, no woman should feel that because she does not wear a nurse's uniform she is not absolved from patriotic service.

"The home women of the country can make of the housewife's apron a uniform of national significance."

MILWAUKEE HEALTH DEPT.

Telephone Main 3715

CITY HALL

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◆=====Bulletin=====◆
of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

UNIVERSITY OF ILLINOIS LIBRARY

GEORGE C. RUHLAND,
Commissioner of Health, *Director*.

JOHN L. MEYER,
Deputy Commissioner, *Editor*.

JUN 29 1917

JUNE, 1917.

Vol. 7, No. 6.



THAT his work may be the stronger and the more enduring, Man is commanded to practice happiness, and amidst all conflicts and distemperatures of life to maintain the sense of Joy and Victory.

* * * For all men, generally speaking, happiness begins with health.

—Newell Dwight Hillis.

THIS NUMBER —

● Look Pleasant, Please!

Bulletin of the Health Department, June 1917

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN L. MEYER, Deputy Com'r, Health Publicity.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MRS. EDITH BAILEY,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

VITAL STATISTICS DIVISION.

Telephone, Main 3715. Sundays and Holidays, Main 3716.

Office Hours, 8 A. M. to 5 P. M.
Saturday afternoons, Closed.

Sundays and Holidays, 9 to 10 A. M.

The division records births, deaths and marriages; these must be reported. It issues birth certificates—certified copies fifty cents. It issues burial permits. (The attention of undertakers is called to the hours of service in this division.) The statistical data of the department are compiled by this division and are on file there.

SANITARY INSPECTION DIVISION.

Telephone, Main 3715. Sundays and Holidays, Main 3723.

Office Hours, 8 A. M. to 5 P. M. daily, including Sundays and Holidays.

The division enforces sanitary rules and regulations. Inquiries or complaints concerning sanitary matters, including the sanitation in factories as well as alley nuisances, rubbish accumulations, garbage cans (**not garbage collection**); the distribution of advertising matter; barns and outhouses; chickens and poultry; the common drinking cup; patent medicine distribution; roller towels; the cleanliness of street cars; wells, etc., should be referred to it.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

JUNE 1917

The President's Example.

"'Business as usual' should mean not merely the business of producing and buying and selling. It should include the whole business of sane and healthful living," declares the Omaha World-Herald.

Then, after reviewing the many burdens and responsibilities that rest upon the shoulders of Woodrow Wilson, the paper goes on to say, "Yet Woodrow Wilson finds time to go to the circus. He finds time, too, for motor rides, for playing golf, for

attending the theater, and for the reading of romances.

"Why does he do it? Because he realizes that only so can he keep himself at his best. Mind and nerves as well as muscles need rest. They need change and diversion especially when sorely taxed. The president knows he must preserve his poise, his fine sanity, his sense of proportion and of relative values, his patience and tolerance and good humor undiminished. If he fails to do it he will be less rather than better qualified to serve his country."

Health first! Think of this the next time you are ill.

ON "LOOKING PLEASANT."

How a smile—*your own* as well as your neighbor's—will loosen a tension, warm the heart and often put an instant end to that worn and torn sort of feeling! Try it!

Even on a gloomy day, when summer is several weeks late!

Let's all do *our* bit, whatever it may be, and look pleasant about it, what?

Even if our dignity or a depressing bit of war news or a flooded garden patch seems to make it unbecoming to smile "out loud," then smile *inside*—and watch it break through to the surface.

One reads with gratification in the

dispatches that the French soldiers have developed a quite definite philosophy in later war days: *Why Worry?*

Why storm and rage at things beyond your control, when all you can possibly accomplish by becoming excited about it, is to put poison into your system that shortens your days.

Get your exercise and diversion so that your head may ever be clear and alert to grasp and deal with each situation that you meet. Cultivate poise. Why lose your temper foolishly?

Look pleasant, please. It pays. It's catching, too!

Bullets may kill thousands—flies *do* kill tens of thousands.



HEALTHIGRAMS



IN JUNE.

A Milwaukee Clergyman was talking about boy nature. "I once said to a little boy: 'Do you know the parables, my child?'"

"Yes, sir," he replied.

"And which do you like best?" I asked.

"I like the one," he answered after a moment's thought, "where somebody loafes and fishes."

If you can't do what you like, try liking what you do.

AN ALIBI.

MISTRESS—Mary, there's a month's dust in the Library.

MAID—Well, you can't blame me; I've been here only two weeks.

It's all right to ride a hobby if you know how to get off.

TESTIMONIALS.

Another good thing to be said for babies is that they never go around telling the smart things that their daddies say.

THE COW WON.

An official of the Board of Health in a town not far from Boston notified a citizen that his license to keep a cow had expired. In reply the official received this:

"Monsieur Bord of Helt — I jus get your notis that my licens to keep my cow has expire. I wish to inform you, M'sieur Bord of Helt, that my cow she beat you to it, — she expire t'ree week ago. Much oblige. Yours with respek,

Pete....."

It is not only man's right to be cheerful—it is a duty.

SUPPOSING.

MOTHER—Herbert, your Uncle Ed is coming for dinner, so go right upstairs and wash your hands!

SON—Yes, mother; but suppose he shouldn't come?

In the long race for success, some start out as if it is going to be a 100-yard dash.

ORDINANCES YOU SHOULD KNOW

To prevent accumulations of material, which are breeding places for flies.

Section 1. Any person, who maintains on any premises, occupied by him, or who permits to exist on such premises, any accumulation of rubbish, filth or material of any kind

whatsoever, that is, or is likely to become a breeding place for flies, or is, or is likely to become a medium for the development of fly larvae, shall, on conviction thereof, be subject to a penalty of not less than dollars (\$10.00) nor more than fifty dollars (\$50) together with the costs of the action.

HYGIENE OF THE NERVOUS SYSTEM.

CAUSES AND AVOIDANCE OF INSANITY.

By RICHARD DEWEY, A. M., M. D.

Insanity may be said never to result from a single cause. It is the outcome of all the inner and outer conditions of the preceding life. Let us for a moment consider the wonderful complexity of mind and of the agencies concerned in genesis of thought and action in our daily lives.

Through the avenues of the five senses a never-ending stream of centripetal sensations and conceptions flow inward and are registered and recorded upon the marvelous tissue of the brain, and there retained by the magic of memory. And the brain—the organ and agent of the mind—is thus a reflex of the outer world; a microcosm which mirrors the universe, just as in a single drop of clear water we may see reflected the sun, the sea, the sky, forests and mountains. And as the brain receives, so it gives forth corresponding centrifugal impulses. Life-force works within the brain just as chemical and electrical forces work in the outward world,—only infinitely more subtly and mysteriously.

HEREDITY'S PART.

Heredity plays an important part in the evolution of insanity. It is present in the innermost and deepest strata of our being, and permeates our every word and deed, yet there is an exaggerated notion in the general mind of the part heredity plays in producing insanity. The fact is overlooked that insanity often does appear in a family which has no previous known record of it — also

that a large majority of the children of insane parents do *not* become insane. Heredity is a *predisposing*, not an immediate or exciting cause of mental disorder, and its action is indirect. The condition which renders descendants of the insane somewhat liable to the same infirmity is a *tendency* only, which may or may not develop according to the presence or absence of other active agents.

This condition or tendency is known as "nervous instability"; it is a constitutional want of equilibrium. Common sense, good judgment, the "stabilizer" which keeps the normal brain mechanism balanced in the ordinary, every-day man or woman, is lacking in the nervously unstable constitution. There may be greater brilliancy and mental power in the disordered mind. It is the *balance of parts* which is lacking. It is more possible for the constitutionality unstable to lose the relation and adjustment of the realities of life than for one free from this handicap.

Those who are lacking in stability do not necessarily lose mental balance. They may be safeguarded in their education and training and by wise living so as to wholly escape. It has been found that not over one in five of those descended from insane parents themselves ever go insane — still less those who are more distantly related. Even this small proportion may be still further re-

duced as greater skill and experience are obtained in educating along healthful lines and in combatting morbid tendencies.

FEAR AND ITS EFFECTS.

I have often been consulted by those who had become painfully obsessed with the apprehension that they were doomed to insanity because it had existed in their line of descent. This haunting fear of an imaginary impending fate is not capable *in itself* of producing mental aberration, though disturbing and depressing. I have often seen patients relieved of these fears, return speedily to a normal state and remain so.

The fall of a tower may result from a combination of causes; quicksand at the foundation, defective brick or stone, poor quality of mortar binding the wall; weak arches. So a mental overthrow may result from inherited defects, various injuries, physical or moral; from exhaustion following various excesses, from shocks and storms that the organism can not withstand. Two individuals may be subjected to precisely the same stress or shock; one will succumb, the other will withstand the assault. The difference will be in the stronger fiber of the one. Two strings of a violin may present no appreciable difference to the eye — one will have a long life, one will part in an hour's use. In some cases, the inferiority of constitution is apparent at a glance to a trained eye, but the conditions which determine results are only partly understood. Great progress is being made at the present day in elucidating mental mechanisms and of the deeper structure which determines outer differences. It is these structural conditions that de-

termine the difference in brains and in personalities.

FINDING A SAFETY-VALVE.

There are various types and degrees of departure from the normal. Temperamental conditions differ enormously. If there is an over-sensitive and excitable temperament, tranquilizing agencies must be sought and protracted strain avoided; dullness and monotony as well. When we have a stolid and apathetic nature, means for creating interest and giving zest, without in the least irritating or overstimulating are necessary.

Some very silent and self-contained natures are very intense, even volcanic, and will express themselves by an unexpected eruption which ought to have been foreseen and avoided. For some active, restless and irrepressible natures a safety valve must be found. Thus it is necessary to deal with inherent defects by endeavoring to see the organization as a whole.

I found it necessary to reserve for a future paper the subjects of alcohol and syphilis.

SO MAY'ST THOU LIVE.

"If thou wilt observe

The rule of not too much, by temperance taught,

In what thou eat'st and drink'st, seeking from thence

Due nourishment, not gluttonous delight,

Till many years over thy head return,

So may'st thou live, till, like ripe fruit thou drop

Into thy mother's lap, or be with ease

Gathered, not harshly plucked, for death mature." —Milton.

Do Your Bit By Keeping Well.

(COLLIER'S WEEKLY.)

Your country needs you, citizens of all ages and both sexes. It needs you, you who are adults—not only in its army and navy, but in its schools and hospitals, its mines and factories, its forests and fields, its commerce and navigation, and its transportation by rail. And it needs its child citizens to take the places of those who may fall in battle and of those who will certainly fall in the march of life.

"Let nothing be wasted!" is the cry that is going forth in conjunction with the call to arms. It is important that every scrap of food be conserved, that every yard of cloth be made to serve its full period of usefulness, that every ounce of metal mined shall find its place in industry, and that every rod of ground shall be so carefully tended that it will produce to its utmost capacity, else famine and defeat may stare the United States and its allies in the face. *But more important by far than all of these is the conservation of human brains, efficiency, health, and lives.*

The United States has been wasteful in the past of not only its food supplies but of its workers. The workers themselves have been guilty of contributory negligence. Twenty-five out of every thousand employees in our industries are constantly incapacitated by sickness, the average worker losing about nine days out

of every year. The actual loss to the individual and to industry is close on to five hundred million dollars a year, and these figures are probably doubled by the money spent on medicines and doctors.

It is estimated that six hundred thousand lives a year are lost in the United States from such wholly preventable causes as polluted water and milk supplies, flies, mosquitoes, adulterated foods, and epidemics caused by bad sanitation. Of these deaths, about one hundred and fifty thousand are of infants in their first year. It is not, of course, possible to place an accurate cash value on human lives, but *the probable loss to the country represents more than a billion dollars annually.*

Now that the army and navy are calling for hundreds of thousands of able-bodied men, and the industries are calling for millions of able-bodied men and women to take the places of those who will go into military service or to make places for themselves in the business world, and now that the future is demanding healthy mothers, fathers, and children in order that the citizens of, say, twenty years hence may be sound in body, *it is the patriotic duty of all public officials, of all parents, of all workers, and of all teachers to keep themselves well and to make every effort to help others keep well.*

Curbstone medical and health advice from salt barrel philosophers and town gossips is usually worth just a little less than it costs—*nothing.*

* * *

What did you waste today?

Fiendish Frauds Prey On Babes.

From "FARMER'S WIFE" Magazine.

But of all fiendish frauds that prey upon precious lives are those that tempt parents to dose their children with injurious drugs. The venders of those falsely named remedies amass fortunes by the patent medicine business, for the sales of all kinds of baby "dope" are truly gigantic.

Soothing sirups, teething sirups, cough killers, croup remedies, "children's comforts" and "baby's friends" have as their base alcohol and one or more stupifying drugs—opium, morphine or chloroform. A slight overdose will sometimes kill outright—often has—but even in moderation they quickly become a necessity to the child and before the parents realize what they have done, they have made their baby into a drug victim.

These "quack" medicines are recommended as harmless; mothers

are advised that they need not be afraid to give them to the youngest babe—and yet the results are deadly; for even if you succeed in getting the child over the influence of the drug, there may remain a permanent effect on the brain in most cases.

It is unthinkable that adults will continue to mortgage future health, destroy digestion and impair their interior organs but how much worse it is for them to pour patented remedies into the tender stomachs of little children!

Aside from the ruined health and premature decline of the body from this widespread and prevalent use of patent medicines and drugs—think of the money they cost!

A safe cathartic should always be on hand. There is hardly any ailment of young or old that will not be helped toward removal if the body is cleansed inside and out. This gives the doctor a fair start.

In the health of the people lies the strength of the nation.—Gladstone.

Smile Today Instead Of Tomorrow.

Worry digs more graves in a month than any sexton ever dug in a life time.

Worry never solved a problem. It has never yet smoothed out the cares of business or the wrinkles on a brow.

If you don't kill that habit of worrying, it will kill you, a poor finish to the grand adventure of life.

Remember what worry means to you—so much needless waste of nervous force, so much happiness thrown away, so much less faith in yourself.

What made you frown yesterday will make you smile tomorrow. Smile at that trouble today instead of tomorrow.

Timely Summer Hints On "First Aid".

Summer days, the Fourth, outing parties and other seasonable events and times bring their quota of emergencies and accidents. Prevention is worth everything. The following advice is intended for "first aid" purposes only. Get a physician or surgeon as soon as possible, for even an injury that seems to be very slight may contain the elements of serious developments.

The most important thing about all wounds is to keep them clean. Rusty nails may cause the worst kind of wounds, as bad as a gunshot wound, although there may be only small holes on the surface.

LOCKJAW.—The germ of lockjaw lives just under the surface of the soil or in dust, and it may be on the rusty nail, or the foot that has been pierced may not be clean and the little germ may be pushed in. In ragged wounds, bits of clothing may get into them, containing the germ. First wash the wound carefully with hot water in which there is some antiseptic, and squeeze gently so as to make the blood flow, and the harmful germs will very likely be brought out. Then take a little piece of clean rag or absorbent cotton, soak it in the water, put it over the wound and tie it on. Be careful that all the rags used are very clean. If the wound becomes inflamed or seems to be painful, consult the doctor at once.

BURNS.—The first thing to do is keep the air from the burn. Pain is caused by the air touching the burnt spot. Small burns can be treated with cold water. If the burn

has been only in water until the doctor comes, he will not have anything to undo. Sometimes flour or ointment is the wrong thing. Water is always at hand, and it stops pain by shutting out the air, and does no harm before the doctor comes. There are three kinds of burns. The first only causes the skin to turn red, the second causes blisters, and the third destroys the skin. When the skin is only reddened, soft clean cloths, soaked in water in which cooking-soda has been dissolved, should be laid over the sore parts, and to keep out the air these should be covered with cloths or cotton batting. When the skin is blistered, oil should be poured over all the burned parts, and then soft cloths soaked in oil placed over it. Carron-oil is the best to use. It is made of linseed-oil and lime water, in equal parts. It should always be kept in the house. Olive-oil may be used instead of linseed-oil. Sunburns should be treated in the same way as other burns.

DOG-BITES.—If any one is bitten by a dog, clean the wound thoroughly with warm water, squeeze out as much as you can, and then treat it as any other wound, with clean dressings. Whether or not the dog was known to be mad, consult a physician. Do not have the dog killed until you find out if the dog is really mad. The Health Department Bacteriological Laboratory examines for rabies.

NOSEBLEED.—For nosebleed, sit up straight and hold the head up; do not lean over a basin. Cold water

or ice on the back of the neck and over the bridge of the nose will help. Place a towel, wrung out in cold water, around the neck, and another one on the lower part of the forehead and on the bridge of the nose. Take a piece of cotton as large as the end of your thumb, tie a piece of thread around it and soak in strong tea, then push it gently up into the nostril. Do not blow the nose or cough. A child who has nose-bleed often should spend a great deal of time in mild outdoor exercise.

FAINTING.—The first thing to do is to place the victim flat on the back. Loosen the clothing, and raise the feet by putting something under them, or lower the head. Dash cold water on the face. If the person does not get well immediately, call the doctor. Fresh air is needed.

WASHING A SICK CHILD.

A sick child is washed preferably in the morning, and in sections. First wash the face, ears and neck. Go over them again with a rinsed wash-cloth and dry thoroughly with a warmed face towel. Then wash each arm and each leg separately, keeping the rest of the body covered. Rub each member with alcohol and dust with powder before proceeding. Now wash the front of the body, then turn the child on the side so that the entire back may be well washed, dried, rubbed with alcohol and powdered. The clean fresh nightdress is now put on, then the bed is changed.

"LOCK THE BARN" FIRST.

Now is the time to screen up! Get your screens installed before the flies

come. No use locking the barn door after the horse has been stolen. Don't wait to chase them out—*Keep them out.*

IF YOU LOVE YOUR BABY.

Keep your house clean.

Keep your food covered.

Cover your garbage can and make your neighbor do the same.

Keep netting over the baby.

Feed no food that flies have walked on.

Buy no food from stores where you see many flies.

Report fly-breeding places to the health department.

SWAT!

Swat the fly, for who knows where that fly came from, or what it may have on its feet! In a certain military camp chloride of lime was sprinkled over the latrines and over the garbage piles, and a quarter mile away was a mess tent. Flies with white powder on their feet were found on the tables and on the food in that tent. He who reads may draw the conclusion.

DIVISION OF SANITARY INSPECTION, MAY 1917.

No. of orders served.....	2804
No. of complaints received.....	2905
No. of inspections made.....	9476
No. of cultures del. and col....	106
No. visits to quarant. houses....	1761
No. houses placarded	653
No. houses disinfected	420
No. calls by ambulance.....	96
No. visits to schools.....	5
No. funerals attended	4
No. arrests	4

DR. T. F. THOMSON,

Chief Sanitary Inspector.

Vacationists—Avoid Typhoid!

This is the season of summer outings. Thousands will drink such water as is available, regardless of its safety.

That is why we speak of "vacation typhoid."

Water is not always safe to drink, simply because it is water; neither can it be judged by its appearance, taste or odor. Clear streams may be as dangerous as stagnant pools or wells of barnyard seepage.

But a thirsty individual often has

no time for "trifles" while on his vacation.

And when his few days of pleasure is followed by a siege of typhoid fever he bewails his "luck."

There's no luck about it. He could have avoided typhoid by following the simple advice:

1—*Be vaccinated against typhoid;*

2—*Boil all drinking water if there is any doubt about its safety;*

3—*Vegetables and fruits must be peeled or cooked.*

Free Life Savers.

The Milwaukee Department of Health furnishes the following prophylactic and curative agents free of charge.

Vaccine virus for the prevention of smallpox;

Diphtheria antitoxin for the prevention and cure of diphtheria;

Typhoid vaccine for the prevention of typhoid fever;

Tetanus vaccine for the prevention of lockjaw;

The laboratory of the Department makes free examinations for the diagnosis of diphtheria, tuberculosis, typhoid fever, pneumonia, gonorrhoea, syphilis, and rabies.

Problem For Health Experts.

Health authorities everywhere of course, are ready to do their bit, wherever it may be, in the present world-conflict. But not a few are facing a peculiar problem. On the one hand there is the desire to serve and the call of the military authorities; on the other, the demand of the public health service — strained to the utmost to safeguard the women and children and the others who will remain at home. It need not be said that more than one sani-

tarian will have a hard time of it, to decide which to do: Remain on urgent duty in the civilian ranks, or heed the call of the wounded and dying in the trenches.

The Congress now has before it a measure which bears on this subject, in the form of a joint resolution to establish a Public Health Reserve which will be at the command of the President and under the direction of the secretary of the treasury.

War And The Tuberculosis Situation.

Grave concern over the probable effect of the war on the tuberculosis situation, is being replaced by a feeling of confidence that America will at least not stop short of profiting by the mistakes of European countries. More than 150,000 men have been discharged from the French army alone for tuberculosis. Pre-enlistment tests were faulty and the ravages of war did the rest. Discoveries of tubercular conditions in the examinations at the recruiting stations offer another related problem — how and where to treat such large and quickly assembled groups of victims.

AWAKE TO SITUATION.

Medical and civic forces, however, are awake to the situation. The Military and National Council for Defense have the advice and support of the best talent in the country. Authorities are already acting on this; for, prompt efforts are being made to guard against mistakes at the recruiting stations and to mobilize available places for treatment as well as provide as rapidly as possible for the unusual demand for extension of such facilities.

England's army has suffered only a very low tuberculosis rate in its soldiery. Unlike the French armies, who have been living in damp soil or underground quarters, the English troops are housed more generally in tents. The English are by habit open air people. Their recruits were selected with particular care to exclude the tubercular.

The National Association for the Study and Prevention of Tuberculosis, meeting in Cincinnati last month, went over the available facts, and pledged its support to the defense authorities in preventing the mistakes found across the sea. This great and encompassing organization will be able to assist efficiently in saving thousands. It is one of many hands of aid and support stretched out to not only the American soldiery but also the civilian in the stress of war times.

NEED IN MILWAUKEE.

In Milwaukee the demands of the problem have made themselves felt, by the call of the defense authorities upon the Health Department to prepare for the care and housing of tubercular patients which are likely to be discovered during the physical examinations in recruiting. This call finds Blue Mound Hospital, for example, unfinished and incomplete although building operations were actually begun in the fall of last year. Employees of the institutions have been living in temporary quarters which are in a state of deterioration. The "war" necessity for more prompt work on the new structures has been called to the attention of city departments conducting building work, steps have been taken to make available all of the funds provided for construction, and all concerned are showing a keen interest in endeavoring to meet the pressing situation.

A hearty laugh is one of the best soul-restorers in the world.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

May, 1917.

Annual Death Rate per 1000.....	13.06	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	25.	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	7.1	Annual Death Rate, Females.....	5.9
Annual Birth Rate, Males.....	12.5	Annual Birth Rate, Females.....	12.5
Death Rate less, Violence.....	12.3	Birth Rate less, Still Born.....	24.2
Deaths recorded	479	Births recorded	918
Marriages	651		

BIRTHS.

SEX.	COLOR.	BY WARDS.
Males	White	First
Females	Colored	Second
		Third
		Fourth
		Fifth
		Sixth
		Seventh
		Eighth
		Ninth
		Tenth
		Eleventh
		Twelfth
		Thirteenth
		Fourteenth
		Fifteenth
		Sixteenth
		Seventeenth
		Eighteenth
		Nineteenth
		Twentieth
		Twenty-first
		Twenty-second
		Twenty-third
		Twenty-fourth
		Twenty-fifth
		Hospitals
		Pairs of twins
		Triples
		Illegitimate
		Still Born

REPORTED BY

Physicians	682
Midwives	218
Others	18

NATIVITY OF PARENTS.

	Father	Mother
Milwaukee	110	155
Wisconsin	270	352
United States	109	109
Germany	106	55
Poland	76	55
Austria	37	43
Bohemia	4	4
Sweden	1	1
Italy	28	26
Roumania	2	3
England	7	4
Holland	1	1
Norway	2	4
Slavonia	4	4
Hungary	37	27
Russia	78	54
Canada	3	4
Greece	6	5
Unknown	20	—
Ocean	—	—
Elsewhere	14	12

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	78	77	White	651	651
Youngest	18	16	Colored	—	—
Widowed	33	41	Others	—	—
Divorced	14	18			

NATIVITY.

	Groom	Bride		Groom	Bride
Milwaukee	29	37	England	3	2
Wisconsin	392	457	Holland	1	1
United States	70	48	Norway	3	—
Germany	35	25	Slavonia	—	—
Poland	23	21	Hungary	11	10
Austria	19	16	Russia	44	23
Bohemia	1	1	Canada	—	—
Sweden	1	—	Greece	5	4
Italy	7	4	Elsewhere	6	2
Roumania	1	—	Total	651	651

AGE.

	Groom	Bride
Under age	36	19
Under 25	272	456
25 to 35	296	142
35 to 45	26	25
45 to 55	13	8
55 to 65	7	—
65 to 75	—	—
Over 75	1	1

RESIDENCE.

	Groom	Bride
Outside State	22	7
Outside City	49	35
Married outside State.....	22	22

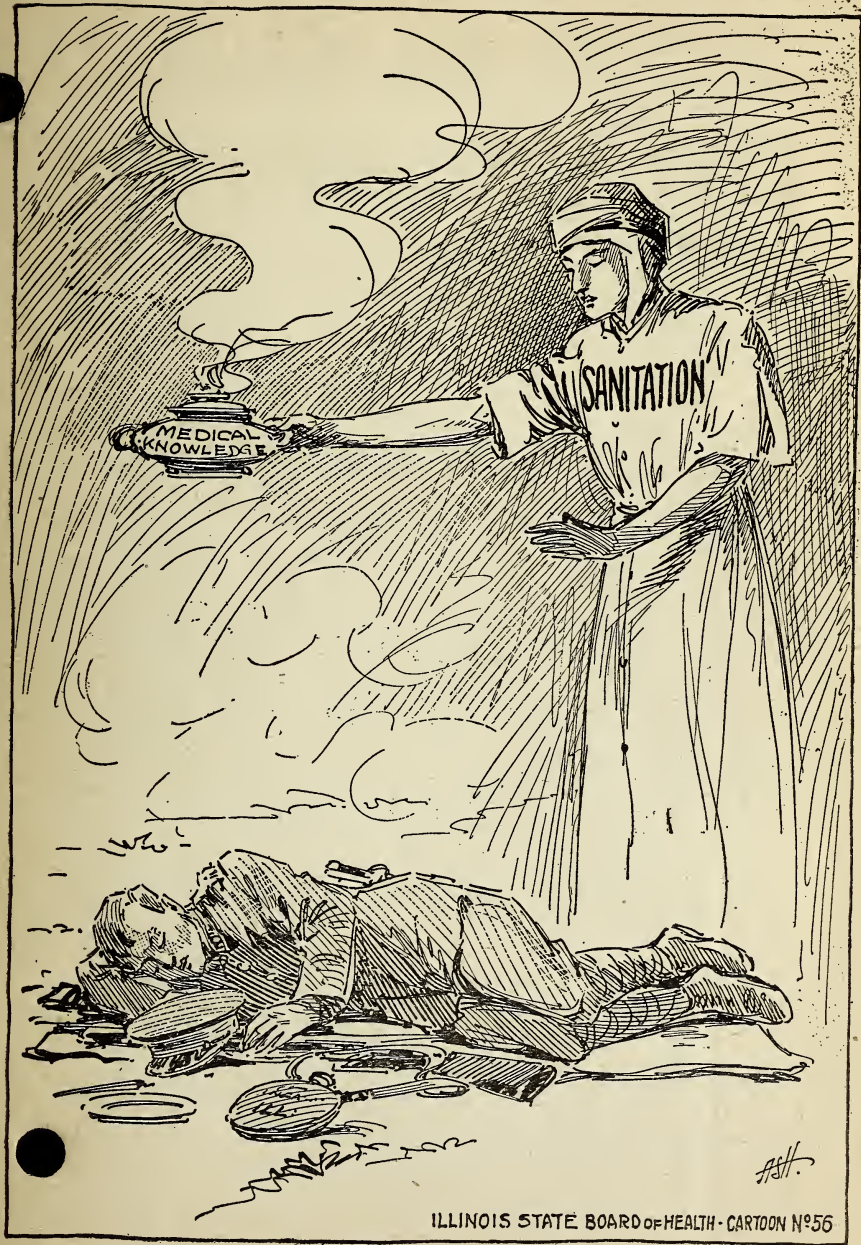
CEREMONY.

By Judges	40
By Justices	36
By Ministers	575

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May
Total Deaths.....	368	458	315	403	419	395	470	534	527	635	571	479
Annual Death Rate.....	11.24	12.78	10.46	11.24	11.69	11.02	13.12	14.56	14.37	17.31	15.67	13.06
Cases and Deaths.....	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Typhoid Fever.....	10	4	12	3	17	5	10	4	1	2	13	4
Measles.....	209	1	59	0	2	22	26	0	0	0	13	0
Scarlet Fever.....	137	4	64	0	91	3	248	3	2	7	135	10
Whooping Cough.....	81	0	170	1	54	169	1	386	4	433	10	238
Diphtheria.....	34	3	21	1	96	71	85	1	2	54	7	10
Influenza.....	0	1	1	0	0	11	82	10	15	5	53	10
Small Pox.....	0	0	0	0	0	0	0	0	7	0	0	0
Poliomyelitis.....	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis Pulm.....	106	0	75	0	4	72	55	75	28	95	30	17
Cancer.....	34	45	16	14	77	33	38	31	27	38	98	0
Meningitis.....	6	3	7	3	1	1	4	5	4	6	9	1
Apoplexy.....	18	19	16	18	34	24	22	20	24	27	28	10
Org. Heart Disease.....	32	35	25	32	40	34	42	44	32	46	25	28
Bronchitis.....	13	35	25	34	8	5	15	16	27	18	15	35
Pneumonia.....	30	19	27	21	37	33	78	117	125	147	116	37
Diarrhoea—Under 2.....	8	13	36	53	28	14	31	34	25	35	21	72
Nephritis.....	25	20	24	22	16	27	31	28	26	31	26	37
Congenital Debility.....	23	30	24	31	16	35	31	16	15	16	31	24
Senility.....	9	10	6	6	22	28	25	7	6	35	5	6
Violence.....	25	93	40	24	22	9	0	28	6	6	8	19
Suicide.....	8	9	3	4	7	9	4	7	6	6	8	4
Homicide.....	1	0	0	1	0	0	0	1	0	0	0	2
Under 30 days.....	34	44	36	40	42	51	52	51	55	57	53	33
Between 30 days & 1 year.....	26	25	55	18	37	31	29	29	68	82	69	54
1 to 5 years.....	26	35	39	35	31	18	35	35	34	57	50	53
5 to 60 years.....	171	217	162	147	167	169	212	223	205	213	248	203
Over 60 years.....	110	117	92	113	142	126	132	173	165	197	151	136
Age at Death, all ages.....	37.5	40.9	35.2	35.4	40.6	40.6	38.1	41.2	35.8	37.6	35.5	36.5
Age at Death, over 5 yrs.....	51.6	52.5	51.	53.5	55.	52.8	51.8	55.5	53.6	54.7	50.5	50.3
Public Health.....	78	108	89	57	85	106	107	108	123	95	135	109

THE GUARDIAN - OF THE NATIONS GUARDIANS.



CITY OF MILWAUKEE

1917 APPROPRIATIONS

(On a Basis of 440,000 population)

Dept.	Total	Per Capita
HEALTH	\$225,320	\$0.51
Industrial Education	287,000	0.65
Police	778,065	1.76
Fire	867,545	1.97
School Board	2,709,698	6.15
Public Works (including Water Dept.). .	\$3,231,134	7.34

MILWAUKEE HEALTH DEPT.

Telephone Main 3715

SIXTH FLOOR

CITY HALL

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

GEORGE C. RUHLAND,
Commissioner of Health, *Director*.

JOHN L. MEYER,
Deputy Commissioner, *Editor*.

JULY, 1917.

Vol. 7, No. 7.

What Did You Waste Today?

Begin now—Do not misuse or destroy even a
particle of food or material.

**WASTE HARMS YOU, DEPRIVES
YOUR NEIGHBOR AND
AIDS THE ENEMY.**

Loyalty demands RATIONAL Economy.
Study Food Values, and avoid under-
nourishment as well as excess.

FREE ADVICE ON DIETETICS.—Milwaukee Health Dept.

Miniature of Health Department Street Bulletin, posted in more than fifty prominent
public places throughout Milwaukee.

Bulletin of the Health Department, July 1917

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN L. MEYER, Deputy Com'r, Health Publicity.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MRS. EDITH BAILEY,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

FOOD INSPECTION DIVISION.

Telephone, Main 3715.

Office Hours:

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays,
Closed.

The division regulates and supervises the sale of foodstuffs in the city. Meat, milk, water dealers' and peddlers' licenses are issued.

The division employs veterinarians and arranges for the impounding and care of dogs that may be afflicted with Rabies or Hydrophobia. Cases of dog bite should be reported to this division. Arrangements can be made with the division for the "Pasteur" treatment following bites by dogs suspected of having rabies.

COMMUNICABLE DISEASE DIVISION.

Telephone, Main 3715. Sundays and Holidays, Main 3723.

Office Hours, 8 A. M. to 6 P. M. daily, including Sundays and holidays.

The division receives physicians' reports; establishes quarantine and arranges for the hospital care of patients upon the requests of physicians; provides supplies for indigent families when under quarantine. Reports of and questions relating to smallpox, diphtheria, scarlet fever, chickenpox, whooping cough and other reportable diseases should be referred to this division.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

JULY 1917

"For Your Own Good."

(By GEORGE C. RUHLAND, M. D., Commissioner of Health).

Mr. Hoover's appeal for greater economy in the use of foodstuffs is an appeal that it will be well for the American to heed, not only because it means compliance with a patriotic obligation, not only because it involves a moral obligation towards the starving millions of Europe, but essentially because it is for his own good.

Living in a land of plenty, the American has become notoriously extravagant. He is especially extravagant in his habits of eating; extravagant not only in that he throws away as garbage, food that might well be utilized, but more seriously extravagant in that he eats more food than he can make use of.

Food taken in excess of the actual needs not only means economic waste, but means in addition there-to, an extra burden upon the diges-

tive system, which sooner or later breaks down under the strain, leaving ruined health, and a shortened life as consequences.

Our vital statistics prove that this is no idle speculation, but a very serious fact, calling for serious consideration.

The food shortage in Europe, which has resulted in that less food and food of plainer quality is taken, is said to have greatly benefited the health of the people of these countries.

Scientists have long preached the desirability and necessity of the simple life and warned against the danger of overeating.

Perhaps Mr. Hoover's appeal to patriotism, backed by stern necessity, will accomplish for America what the sanitarian has vainly been trying to achieve.



HEALTHIGRAMS



ALTOGETHER, NOW!

Smile a smile;
And when you smile
Another smiles, and soon there's
miles
And miles of smiles; and life's
worth while
you but smile.

*It is better to make a Life than to
make a living.*

VAULTING AMBITION.

Oliver Herford, the great humorist, was placed next to a soulful poetess at a swell dinner one night: She made him nervous. Finally she gurgled, "Have you no other ambition than to force people to degrade themselves by laughter?"

Yes, he had an ambition, he admitted. She pleaded to know about

it. "Tell me about it, do!" she exclaimed.

"Well," he said, "if you must know—I want so much to throw a soft-boiled egg into an electric fan," he murmured.

What do you do with the time you save?

ABSENT MINDED.

"The little stranger has arrived," said the nurse, opening the busy professor's door slightly.

"What's that?" the professor burst out.

"It's a sweet little boy," ventured the nurse.

"Little boy—sweet little boy," the professor mused. "Well, ask him what he wants."

Remember that a baby is neither a rattle nor a movie show. Don't treat it as a source of amusement for the neighbors.

Another Item In Conservation.

"Conservation along all lines is being urged," says the Bulletin of the Connecticut Board of Health, "but do not forget the doctor.

"Thousands of doctors will go into military service during the next few months. Many people will not realize until their family physician has gone how much they have depended upon his skill and judgment for their well being.

"Those at home will be kept very busy with the added duties. Many of these doctors are arranging to share their fees with their brothers

ADAPTABILITY.

"Johnnie," said the physiology teacher," now give me a familiar example of the human body as it adapts itself to changed conditions."

"Yes-sum," answered Johnnie, "my aunt gained fifty pounds in about a year and her skin never cracked."

Save the Waste!

THEN AND NOW.

It costs a lot to live these days,
More than it did of yore;
But when you stop to think of it
It's worth a whole lot more.

Always put off until tomorrow, the things you shouldn't wear overnight.

in the service and by so doing are rendering patriotic service. There are many doctors over-worked because of the thoughtlessness of their patients and we take the liberty of offering these suggestions:

"1. Do not wait until evening or night to call your doctor when you could have called him earlier.

"2. When calling a doctor do not send the message to come "at once" unless the case is urgent.

"3. Leave for the doctor an idea of the service required, whether medical, surgical or otherwise."

Think Health! Cultivate health for the happiness, contentment and moral gain that it brings.

EVERYONE MUST ENLIST IN THE WAR ON WASTE.

In the name of common humanity and of common sense, let us at once adapt ourselves to the extraordinary war conditions which have come upon us.

Extravagance and waste must give way to rational economy and especially the conservation of food.

It seems certain we will economize either voluntarily or by Force.

This number of the Milwaukee Health Department Bulletin is devoted to the War on Waste.

Government statisticians assert that one dollar out of every five that is spent for food, is thrown away in some American households. To illustrate how waste mounts up in this big country of ours, let us consider:

"A PAT OF BUTTER."

One pat or serving of butter is a little thing—there are about 64 of them in a pound.

In many households the butter left on the plates probably would equal one pat, or one-fourth of an ounce, daily—scraped off into the garbage pail or washed off in the dish pan.

But if every one of our 20,000,000 households waste one-fourth of an ounce of butter daily, on the average, it means 312,500 pounds a day—114,062,500 pounds a year.

To make this butter would take 265,261,560 gallons of milk—or the product of over half a million cows.

But butter isn't eaten or wasted in every home, some one objects. Very well. Say only 1 in 100 homes wastes even a pat of butter a day—over

1,000,000 pounds wasted. Still intolerable when butter is so valuable a food and every bit of butter left on a plate is so useful in cookery.

"AN OUNCE OF MEAT."

An ounce of edible meat—lean meat, fat and lean, suet or fat trimmed from steak, chop, or roast—seems hardly worth saving.

Yet if every one of our 20,000,000 American families on the average wastes each day only 1 ounce of edible meat or fat, it means a daily waste of 1,250,000 pounds of animal food—456,000,000 pounds of valuable animal food a year.

At average dressed weights, it would take the gross weight of over 875,000 steers, or over 3,000,000 hogs—bones and all—to provide this weight of meat or fat for each garbage pail or kitchen sink. If the bones and butcher's waste are eliminated, these figures would be increased to 1,150,000 cattle and 3,700,000 hogs.

Or, again, if the waste were distributed according to the per capita consumption of the various meats (excluding bones), it would use up

a combined herd of over 538,000 beef animals, 291,000 calves, over 625,000 sheep and lambs, and over 2,132,000 hogs.

Millions of tons of feed and hay, the grass from vast pastures, and the labor of armies of cattlemen and butchers also would be scrapped by this meat-waste route.

OTHER ITEMS OF WASTE.

That's only one phase of the big conservation problem—big as the single item of sheer waste is!

There is waste in selling, transportation, buying and preserving of foods. In the end, waste means the failure to make full use of everything that is bought or raised—all along the line.

The country has undertaken a mighty and noble task in endeavoring to "Save the Waste and Win the War."

The victory will be won, for the largest part, right in the kitchen—in the finely equipped kitchen as well as in the humble cookery of the modest home.

STORE PROPERLY.

Don't think that any place in the cellar or pantry is good enough to store food.

Heat, dampness, poor ventilation, bruising or breaking will rapidly make many vegetables rot, ferment or spoil. Warmth and light make vegetables sprout and this lowers their quality.

The moment meat, fish, milk and eggs are allowed to get warm they begin to spoil.

Bacteria and germs multiply rapidly in slightly warm food and quickly make it dangerous or unfit to eat.

Do not keep perishable foods in a hot kitchen or pantry or in a sunny place a moment longer than is necessary.

Dry cold is a better preservative than damp cold.

KEEP FOOD COVERED AND CLEAN.

The dust particles in the air carry molds and germs.

Meat, fish and milk are ideal breeding grounds for such germs. Keep your food covered so that these bacteria and germs will have as little chance as possible to get on your food.

House flies—better called "typhoid flies"—are among the dirtiest things that enter our homes. They fly from sewers, privies and manure heaps, carrying filth on their feet, which they deposit on any food on which they alight. Frequently germs of typhoid fever are carried by flies in the filth on their bodies and in their excrements (flyspecks).

Ordinary cleanliness demands that flies be kept out of our homes and away from our food.

DIVISION OF SANITARY INSPECTION, JUNE 1917.

No. of orders served.....	2625
No. of complaints received.....	2735
No. of inspections made.....	8058
No. of cultures del. and col.	144
No. visits to quarant. houses...	2010
No. houses placarded.....	633
No. houses disinfected.....	402
No. calls by ambulance.....	84
No. visits to schools.....	
No. funerals attended.....	
No. arrests	7

DR. T. F. THOMSON,
Chief Sanitary Inspector.

THE FIRST LINE OF DEFENSE.

"Militarists tell us that the first line of defense of a country is in the navy and that the second line is in its coast-line fortifications and that its third line of defense is in the army. I deny that. The first line of defense of this or any other country is the children of the country, and if by any appropriation or any amount of money there can be built up in this country a strong, active, fighting race of men and women who are able to take care of themselves, that money, in my judgment, will be well and economically expended."—*Congressman Wm. E. Cox, of Indiana.*

Return Milk Bottles Promptly.

Returning milk bottles promptly is no less than "doing a bit" in the present big movement for conservation. And, it is no unimportant "bit". The public has a mighty selfish interest in conserving the supply of milk bottles! It is reported that some 150,000 bottles are annually lost in Milwaukee. Each costs

4 or 5 cents. Figure the loss. What an unnecessary burden of expense; which, like all expense that enters into the cost of doing business, is eventually borne by the public! The Health Department is using its facilities to help stop this item of waste. Do your share, and help by calling the attention of your neighbor to the movement.

More Pointers On "First Aid".

(By DR. C. W. HOPKINS, Chief Surgeon, C. & N. W. Railway).

Dr. Hopkins' instructions, recently made public, are applicable particularly in industrial life, but will also be useful in homes, for summer outings and the like. They will be helpful, pending arrival of a physi-

Don't uncover a wound after it is bandaged. If it bleeds, apply more bandages.

Don't soil dressings.

OPEN WOUNDS.

Don't touch open wounds with bare hands.

Don't disturb blood clots or wash them away.

Don't use a quid of tobacco or spider webs to stop bleeding.

IN GENERAL.

Don't try to do too much.

Don't apply bandages too tightly.

BURNS AND SCALDS

Burns and scalds should be treated in the same manner as open wounds. Cut the clothing away if necessary.

Don't attempt to remove pitch, varnish or wax from a burn.

Don't use oils on burns.

SHOCK.

A person in shock has pale, clammy skin, weak pulse, sighing respiration.

Place patient on his back. Cover him up. Move him to the best place of shelter at once. If possible apply external heat by means of blankets or hot water bottles or hot bricks. Be careful not to burn the patient.

Hot water, hot tea, or hot coffee, beef tea or broth are the best stimulants. Don't give him whiskey or other alcoholic stimulants.

FITS.

A person suffering from a fit should be kept quiet on the back. Loosen the clothing about the neck and abdomen, and be careful he does not injure himself.

A wedged handkerchief or piece of wood or cork should be placed between the teeth to prevent injury to the tongue.

HEAT EXHAUSTION AND SUNSTROKE.

In heat exhaustion the skin will be cold and clammy and the condition will be the same as shock; the same treatment will be required.

In case of sunstroke the body feels hot to the touch; is dry. Cloths wet in ice water, or in the coldest water at hand, should be at once applied to the head and body, and along the spine from the head downward, and frequently renewed. For the head,

the application of cracked ice in a towel is recommended.

FOREIGN BODY IN EYE.

Foreign bodies should be removed from the lids only.

Don't touch the eye with dirty fingers or unclean cloths.

Don't try to remove a foreign body from the eyeball. Dirty toothpicks or dirty instruments are dangerous, and may cause serious results.

NOT TOO MUCH, NOR TOO LITTLE.

By Arnold Lorand, M. D.

(Author of "Old Age Deferred.")

The keynote in the hygiene of food is moderation.

It is certain that more people die from eating too much than too little. It is wonderful to consider how little food animals, or human beings, can exist upon for a long time and remain in good health; and it is certain that the foundations of many diseases are laid by excessive eating.

But prolonged underfeeding may be quite as dangerous as overfeeding. In starvation the resistance against infectious diseases and especially tuberculosis, is diminished.

DON'T "SLOUCH."

Proper posture and carriage, with shoulders square, chest arched, head erect, and body well stretched from the waist up, will of its own account contribute much toward relieving our people of the many petty and not a few of the serious ills from which they are now suffering. It is the foundation of robust health, should be insisted upon in children from the very beginning until it becomes a habit.

HYGIENE OF THE NERVOUS SYSTEM.

THE CAUSATION OF INSANITY.—(B) ALCOHOL.

By RICHARD DEWEY, A. M., M. D.

Alcohol produces its injurious effects on the brain and nervous system in so many different ways that only the special student of the subject could grasp them all. We will limit ourselves to a few of the more serious ones.

Alcohol, like fire, "is a good servant but a bad master." It may be termed an "evil spirit" in a literal sense; for although, in some cases, it gives temporarily exhilarating and agreeable effects, and although it is very valuable in the arts and sciences, the havoc it has wrought upon the human race may justly be regarded as even greater than that of the twin scourges, war and pestilence, for these latter are only intermittently active while alcohol is "getting in its work" every day and every hour and has done so from prehistoric times through the centuries.

RESULTS OF TESTS.

Alcohol wears a mask of seeming energy and inspiration, but all its effects are lowering and weakening. You can take a group of men or women engaged in any occupation you please, let them first perform a certain task in the usual and normal way; then give them each a cocktail or a high ball. Now let these same people repeat the same task under other conditions but the alcohol (being unchanged) and it will be found not one of them can do the task as well or as quickly and accurately under alcohol as they could

without it; let the task be shooting at a mark, performing an arithmetical computation or doing an athletic "stunt". At the same time, the takers of the alcohol will feel exalted and believe themselves to be doing uncommonly well. This has been established over and over again by scientific experimentation.

MANY STRANGE EFFECTS.

The poison of alcohol, circulating in the blood, irritates and inflames the superficial nerves which supply the muscles controlling the upper and lower extremities. The result is "alcoholic neuritis", producing a paralysis of feet or hands or both, making helpless cripples of its victims, sometimes for weeks or months, sometimes permanently. In many cases also the poison works upon the central nervous system so that delirium or insanity complicate the condition.

These patients, with "wrist drop" or "foot drop" may be seen hobbling around any large general hospital. Many of them are impaired in mind and memory and occasionally present a very curious disorder known as "Korsakoff's psychosis." In this condition, the normal sense of time and place is lost, so that the patient can not tell you where he is or give you the hour of the day, the day of the week or month. He is in a waking dream, though appearing as usual outwardly, and will proceed to fabricate the most improbable stories and relate them with a sober

face; such as, describing a hunting or fishing expedition that he says happened yesterday and giving the kind and amount of game he bagged, while he has in reality not been out of the hospital or out of bed for months.

EFFECT ON THE TISSUES.

The presence of alcohol in the system is injurious to all the tissues. Its chronic use leads to disease and final destruction of liver, kidneys, blood-vessels, and thus reacts upon the brain; heart action is seriously interfered with and the heart muscle itself becomes degenerated. Alcohol extracts water from the tissues, leading to hardening, wasting and destruction of nerve tissues. Fibrous tissue is here formed which crowds out and destroys normal tissue, thus thickening the blood-vessels. "Arterio-Sclerosis" reduces the blood supply by narrowing the calibre of the arteries and impairing the nutrition of the brain. A very great number of cases of insanity result from this cause, sometimes taking the form of presenile decay; at other times of alcoholic mania or melancholia or again of acute delirium, often running to a fatal course. Also, prolonged and fatal stupor and convulsions from uremic poisoning may occur as a result of alcoholic kidney disease — all these are familiar to the medical man.

The well-known "delirium tremens", called in the slang of the day, "jim jams", is another of the protean forms of mental disease that alcohol produces. The word "tremens" suggests trembling and this is a familiar nervous phenomenon of alcoholism. The shaky, unsteady muscles produce tremor in all the

muscles of the body, a staggering gait and such palsy of hands and arms that Tantalus-like, the victim can not convey a cup or a glass to his own lips without spilling the contents by his wild gyrations, sometimes losing every drop.

HOSPITAL RECORDS.

Statistical studies of the cause of insanity in the asylums and hospitals for the insane shows that about 15 per cent of the total number of cases is directly attributable to alcohol. This does not include the great number of indirect results falling upon wives and children ruined in health from starvation, neglect and abuse, and all sorts of injuries and accidents; physical ills, a host of moral ills; the fatal quarrels, crimes and scandals growing out of drunken brawls.

Venereal disease—primary, secondary and tertiary, with its attendant ruin of mind and body to the third and fourth generation—is frequently contracted by a man rendered reckless by drink (in a succeeding chapter, I shall speak of venereal disease as a cause of diseases of brain and mind). I have seen a large number of inebriates who, in later life, became subject to epileptic fits and ultimately died in convulsions. It is also well known to medical men that epilepsy and feeble-mindedness are not infrequently found in children the offspring of drunkards.

Further time and space are lacking to describe the havoc wrought by alcohol upon body and mind, though the material and the data for such description are all too abundant.

Will You Co-operate?

(By GEORGE C. RUHLAND, M. D., Commissioner of Health.)

The best way in which the public can protect itself against infantile paralysis and can assist in keeping down contagious disease is by the prompt reporting of all cases of contagious disease and of cases suspected of being contagious.

The health department is the proper institution especially organized to take the necessary steps for the control of contagious disease. Obviously, however, if this department is not notified of the existence of such cases, it can not become effective. Co-operation by reporting, then, is the first and most essential step to keep our city free from contagious disease.

The health department does not anticipate that there will be any large number of cases of infantile paralysis in our city this year. Since the beginning of the year but three cases have been brought to the attention of the department. There is, consequently, no reason why the

public should grow alarmed over the situation.

One thing that should be remembered for the control and prevention of contagious disease is this: The discharges from the mouth, nose or bowels of the patient are, essentially, the means for transmitting the disease. If these discharges are carefully sterilized, if those who are in attendance upon the patients will carefully wash their hands each and every time that they have been in contact with the patients, and if the public will learn to keep unwashed fingers out of the mouth and teach the children the importance of this sanitary precaution, there will be a great reduction in the spread of contagious disease.

About 80 per cent of contagious diseases are conveyed by way of the mouth. Cleanliness of the hands that convey the food and sterility of the food itself are, therefore, obviously some of the important measures in the prevention of the spread of contagious disease.

The Risk Of "Doping" Baby.

(From a U. S. Government Bulletin)

Attention has already been called to the danger of giving medicines to babies and children save under competent medical advice, but it is well to emphasize this prohibition particularly in regard to proprietary preparations. Numerous widely advertised nostrums, frequently sold as "soothing" sirups, and preparations

claiming to cure the ills of teething, diarrhea, coughs, colds, and the like, often contain dangerous drugs, and many children have lost their lives by being given such medicines.

There is evidence to show that children who are repeatedly dosed, but who survive the dosing, sometimes learn to crave these quieting

drugs. They are restless and irritable after the effect of the drug wears off and remain so until it is repeated, the drug habit being thus formed in the same way as with grown people. If urged to use a patent medicine, the mother should always examine the label very carefully, for the Federal food and drugs act requires the manufacturers of patent medicines to print on the label of the bottle the amount or proportion of certain dangerous drugs that may be present in the so-called "remedy." Drugs enumerated in the law are:

Alcohol, morphine, opium, cocaine, heroin, alpha or beta eucaine, chloroform, cannabis indica, chloral hydrate, or acetanilide, or any derivative or preparation of any such substance contained therein.

If the names of any of these drugs or derivatives of them (some of which are laudanum, paregoric, Dover's powder, codein, dionin, chlorodyne, hypnal, acetphenetidin, lactophenin, phenacetin, antipyrin, analgesin, antikamnia, orangeine, and phenalgin) appear on the label, or if extravagant claims are made in the advertisements as to the power of the medicine to cure a large number of diseases, the mother should be on her guard against the "remedy."

A publication of the State Board of Health adds the following on this subject:

"The following named soothing syrups commonly given to children during their teething period have been claimed by the United States government chemists as 'baby killers' and the public is hereby warned against the use of any of these preparations for children.

"Mrs. Winslow's Soothing Syrup (Morphine Sulphate).

"Children's Comfort (Morphine Sulphate).

"Dr. Fahey's Pepsin Anodyne Compound (Morphine and Sulphate).

"Dr. Fahrney's Teething Syrup (Morphine and Chloroform).

"Dr. Fowler's Strawberry and Peppermint Mixture (Morphine).

"Dr. Grove's Anodyne for Infants (Morphine Sulphate).

"Hooper's Anodyne, the Infant's Friend (Morphine Hydrochloride).

"Jadway's Elixir for Infants (Codein).

"Dr. James' Soothing Syrup (Heroin).

"Koepp's Baby's Friend (Morphine Sulphate).

"Dr. Miller's Anodyne for Babies (Morphine Sulphate and Chloral Hydrate).

"Dr. Moffet's Teething Powders (Powdered Opium).

"Victor Infant Relief (Chloroform and Cannabis Indica)."

There is no limit to a man's credit when he wants to borrow trouble.

SUMMER HOUSES.

People who rent houses or rooms in the country during the summer ought always to inquire about the health of the persons who lived there before them.

It has been ascertained that persons have been infected with tuberculosis after having lived sometime in a house inhabited before them by a patient.

When houses or rooms were occupied by sick persons, or even when in doubt, disinfection is absolutely necessary.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

June, 1917.

Annual Death Rate per 1000.....	12.3	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	24	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	6.4	Annual Death Rate, Females.....	5.9
Annual Birth Rate, Males.....	13.5	Annual Birth Rate, Females.....	13.5
Death Rate less, Violence.....	11.2	Birth Rate less, Still Born.....	26.1

Deaths recorded	451	Births recorded	991
Marriages	680		

BIRTHS.

SEX.	COLOR.	BIRTHS.	BY WARDS.	
Males	White	First	27	
Females	Colored	Second	35	
REPORTED BY		Third	29	
Physicians	743	Fourth	22	
Midwives	228	Fifth	32	
Others	20	Sixth	41	
NATIVITY OF PARENTS.		Seventh	37	
	Father	Mother	Eighth	37
Milwaukee	139	167	Ninth	50
Wisconsin	302	350	Tenth	25
United States	118	109	Eleventh	48
Germany	103	83	Twelfth	40
Poland	77	61	Thirteenth	48
Austria	50	51	Fourteenth	51
Bohemia	7	6	Fifteenth	19
Sweden	1	—	Sixteenth	9
Italy	27	25	Seventeenth	32
Roumania	1	2	Eighteenth	17
England	12	10	Nineteenth	23
Holland	—	1	Twentieth	57
Norway	1	3	Twenty-first	53
Slavonia	2	4	Twenty-second	34
Hungary	36	31	Twenty-third	55
Russia	74	58	Twenty-fourth	44
Canada	—	2	Twenty-fifth	32
Greece	16	14	Hospitals	97
Unknown	11	—	Pairs of twins	9
Ocean	—	—	Triplets	—
Elsewhere	14	14	Illegitimate	21
			Still born	35

NATIVITY OF PARENTS.

	Father	Mother
Milwaukee	139	167
Wisconsin	302	350
United States	118	109
Germany	103	83
Poland	77	61
Austria	50	51
Bohemia	7	6
Sweden	1	—
Italy	27	25
Roumania	1	2
England	12	10
Holland	—	1
Norway	1	3
Slavonia	2	4
Hungary	36	31
Russia	74	58
Canada	—	2
Greece	16	14
Unknown	11	—
Ocean	—	—
Elsewhere	14	14

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	58	77	White	680	680
Youngest	18	15	Colored	—	—
Widowed	36	34	Others	—	—
Divorced	17	31			

NATIVITY.

	Groom	Bride		Groom	Bride
Milwaukee	8	12	England	11	4
Wisconsin	420	494	Holland	—	9
United States	110	73	Norway	2	1
Germany	35	23	Slavonia	—	—
Poland	17	14	Hungary	19	14
Austria	15	11	Russia	24	20
Bohemia	—	—	Canada	3	2
Sweden	1	2	Greece	4	4
Italy	6	3	Elsewhere	5	3
Roumania	—	—	Total	680	680

AGE.

	Groom	Bride
Under age	36	12
15 to 25	250	436
25 to 35	349	198
35 to 45	56	25
45 to 55	9	8
55 to 65	2	—
65 to 75	—	—
Over 75	1	1

RESIDENCE.

	Groom	Bride
Outside State	33	18
Outside City	68	44
Married outside State.....	18	18

CEREMONY.

By Judges	58
By Justices	30
By Ministers	592

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June
Total Deaths.....	458	315	403	419	395	470	534	527	635	571	479	451
Annual Death Rate.....	12.78	10.46	11.24	11.69	11.02	13.12	14.56	14.37	17.31	15.67	13.06	12.3
Cases and Deaths.....	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths
Typhoid Fever.....	12	3	21	17	3	10	4	1	6	13	2	13
Measles.....	59	1	16	0	22	26	44	2	32	135	4	8
Scarlet Fever.....	64	4	46	0	169	248	396	433	12	10	234	4
Whooping Cough.....	170	2	209	1	71	85	98	54	177	167	11	337
Diphtheria.....	21	3	9	6	11	82	116	67	50	53	7	175
Influenza.....	1	1	0	0	2	0	0	0	4	1	1	9
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0
Polymyelitis.....	0	4	1	4	1	1	75	0	0	0	17	0
Tuberculosis Pulm.....	75	30	99	14	22	55	31	28	95	36	90	23
Cancer.....	45	16	34	28	33	38	31	27	38	25	29	103
Meningitis.....	3	7	3	3	4	4	5	4	6	9	10	5
Apoplexy.....	19	16	18	34	24	22	20	24	27	28	28	25
Org. Heart Disease.....	35	25	32	40	34	42	44	32	48	46	35	53
Bronchitis.....	8	5	4	8	5	16	16	27	16	15	7	10
Pneumonia.....	19	27	21	37	33	78	117	135	147	116	72	39
Diarrhoea.....	13	36	51	16	14	17	14	16	20	21	20	19
Nephritis.....	20	24	32	28	27	32	34	25	35	37	37	25
Congenital Debility.....	20	24	31	31	35	31	28	26	21	31	24	23
Senility.....	10	6	6	6	9	25	18	15	16	5	6	9
Violence.....	93	40	24	22	28	25	28	25	26	35	19	38
Suicide.....	9	3	4	7	9	4	7	6	6	0	4	5
Homicide.....	0	0	1	0	0	1	3	0	0	3	2	2
Under 30 days.....	44	36	40	42	51	52	51	55	57	53	33	39
Under 30 days & 1 year.....	25	55	18	37	31	29	32	68	83	69	54	47
Between 1 to 5 years.....	25	20	35	31	18	35	35	34	57	50	53	30
Between 5 to 60 years.....	217	162	147	167	169	212	223	205	213	248	203	213
Over 60 years.....	117	92	113	142	126	132	173	165	197	151	136	122
Age at Death, all ages.....	40.9	35.2	35.4	40.6	40.6	38.	41.2	35.8	37.6	35.5	36.5	36.8
Age at Death, over 5 yrs.....	52.5	51.	53.5	55.	52.8	51.8	55.5	53.6	54.7	50.5	50.3	48.
Public Institutions.....	108	89	57	85	106	107	108	123	95	135	109	114

ORDINANCES YOU SHOULD KNOW

Regulating the Sale of Water in the City of Milwaukee.

No dealer in water who sells at places other than on his own premises shall sell or offer for sale any water intended for use as a human beverage, or likely to be so used, without having first obtained a license * * * provided, that no such license shall be required of anyone who sells water purchased from anyone licensed under this ordinance, in the original containers.

The fee for the license shall be one dollar and shall be paid to the City Treasurer, who shall issue a receipt therefor. All such licenses shall expire on the first day of May following the date of their issue. * *

Each application shall be accompanied by the original or a certified copy of a certificate of analysis of the water. * * *

All bottles and other containers * * * shall be closed by a crown seal bearing the name or imprint of the manufacturer or bottler, or the outlet of such container shall be sealed with a seal bearing the name and address of the manufacturer or bottler in such a manner that the con-

tents of the container cannot be removed except by breaking the seal, or the outlet of such container shall be closed in some other sanitary manner.

All bottles and other containers shall be kept clean and shall be thoroughly sterilized before they are filled or refilled. * * *

All buildings, structures, and all piping, utensils, wagons and places or things used shall be maintained in a clean and sanitary condition.

All persons employed in the handling, bottling or transporting shall be in a proper state of personal cleanliness, shall wear clean clothing, and shall be free from communicable disease as established by a physical examination.

Penalty: Not less than ten dollars nor more than fifty dollars, together with the costs of prosecution, for the first offense; and for the second and each subsequent offense, not less than fifty dollars nor more than one hundred dollars, together with the costs; in default of payment, imprisoned in the county jail or house of correction for not less than five days nor more than ninety days, or until such penalty and costs be paid.

The life of a single child is too precious to endanger at any time, least of all when the man-power of the world is being taxed as never before.

* * *

Keeping Healthy is "Doing a Bit."

* * *

It seems strange to speak of an army of diet experts, but such an army is just as important as one carrying modern rifles and sharp bayonets.—Dr. Harvey W. Wiley.

SAVE THE WASTE!

BY HERBERT C. HOOVER,
Food Conserver of the U. S.

WE have the major burden of feeding the whole world.

Those who remain at home can "fight by helping the fighters fight, and can serve by saving." Since food will decide the war, each American woman can do a real national service by protecting the food supply of the nation.

Ninety per cent. of American food consumption passes through the hands of our women. In no other field do small things when multiplied by our hundred million people count for so much.

A single pound of bread saved weekly for each person will increase our surplus of wheat one hundred million bushels, and an average saving of two cents on each meal every day for each person will save to the nation two billion dollars annually.

Use and preserve more fruits, vegetables and foods not suitable to be sent to camps or firing lines.

Buy food grown close to your home. This reduces the food distribution problem.

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

GEORGE C. RUHLAND, M. D.
Commissioner of Health, *Director*.

JOHN L. MEYER,
Deputy Commissioner, *Editor*.

AUGUST, 1917.

Vol. 7, No. 8.

HEALTH AND PATRIOTISM.

ALL the armaments in the world, the best that Krupps or Bethlehem Steel can turn out will never prevent one foe from landing on our soil if the man behind the gun is a degenerate.

Not less so is it on the farms than at arms.

One is surprised to find how large a proportion of our young men of today are rejected. One is reminded that we are threatened with a deterioration which may imperil our very existence. May we not well say to the men of today: "The waste of your health may imperil not only your living but your liberty."

And have we as a nation realized that our greatest asset was not our banks, or our factories, or our mines, or our farms, but our manhood?

May we not well now turn our attention to building up our walls at this point?—See 212

Bulletin of the Health Department, Aug. 1917

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN L. MEYER, Deputy Com'r, Health Publicity.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MRS. EDITH BAILEY,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

BACTERIOLOGICAL LABORATORY.

Telephone, Main 3715. Sundays and Holidays, Main 3716. Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday Afternoons, Closed. Sundays and Holidays, 9 to 10 A. M.

The laboratory examines for diphtheria, tuberculosis, typhoid, rabies, pneumonia, influenza, cerebrospinal meningitis, ophthalmia neonatorum, gonorrhea, syphilis, Vincent's angina, trichinosis, and other forms of communicable disease. Bacteriological examinations of milk, water and foodstuffs are also undertaken.

Blood cultures for typhoid, and spinal punctures are made upon the request of the attending physician.

Bacteriological specimens must not be sent through the mails.

CHEMICAL LABORATORY.

Telephone, Main, 3715. Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday Afternoons and Sundays, Closed.

The Chemical laboratory makes analyses of any material that can be chemically analyzed provided that such an analysis is of public concern.

It is regularly engaged in analyzing foodstuffs, water, milk, etc. The City Chemist may reject samples if the analysis is of personal rather than of public concern.

Out-of-town specimens will not be handled.

The laboratory, also, regularly makes tests of the city's gas supply.

Files are kept in the laboratory concerning patent medicines and inquiries concerning such medicines should be directed to the laboratory.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

AUGUST 1917

INVENTORYING OUR VITAL ASSETS.

(By GEORGE C. RUHLAND, M. D., Commissioner of Health.)

WE can build battle ships and transports; we can turn out guns and ammunition; we can manufacture all the implements necessary to carry on the war; we can produce foods sufficient for our own needs and likely have enough to also feed the starving nations of Europe. All this we can, undoubtedly, do.

The determination factor, however, for the present struggle, as well as for the struggle after the war, is represented in the man-power which the nations can muster.

No matter on what terms this war may be brought to an end, that nation which is physically most fit will ultimately rise supreme. On this point hangs the destiny of nations.

Are we physically decadent? Are we losing in physical stamina? As a nation, what is our physical fitness?

The answer to these questions is of momentous importance. We must know. We must know, not only for the present crisis, we must know for the future.

The examining boards in charge of the recruiting work for the Government will furnish the answers to these questions. *This is a rare opportunity for taking an inventory of the physical fitnesses of the nation's young manhood.*

Perhaps the present circumstance will serve to impress the public sufficiently, so that the cry of warning raised so often in the past may now find a hearing.

If we fall below the average standard, if we are deteriorating, as has been claimed, then let us know the truth so that we may the better apply the remedy.

The Public Health Nurse.

(CONTRIBUTED.)

Where the cooling breezes never seem to come,	Here—in spotless garb, amid disease and grime,
Where the summer heat is throbbing out its curse,	Is she carrying the gospel of the clean,
Where the stench of human living marks the slum,	To the cankered heirs of this our public stain,
There is where you'll find the Public Health Nurse.	Does the Health Nurse bear the slogan that will win.
Where the garbage-littered alleys ooze and smell,	To the suffering and needy and distressed
Where the old-faced children swarm the narrow street,	Is she giving without stint her love and care;
Where is found the human dump, a living hell,	And, wherever she is known, her name is blessed,
Where they're slaving on but half enough to eat.	And wherever she is needed, she is there.

ORDINANCES YOU SHOULD KNOW

FRUITS, VEGETABLES, ETC., FOR SALE NOT TO BE EXPOSED IN OPEN AIR

Section 822. It shall be unlawful for any person, firm or corporation to expose for sale in the open air outside of a store or building fruits and vegetables, groceries or confections, within the city of Milwaukee, unless the same are kept in covered receptacles or compartments. The provisions of this section shall not apply to fruits or vegetables which are ordinarily washed or divested of their outer covering before using. Fruits and vegetables of such a nature may be exposed for sale if placed upon platforms or shelves not less than eighteen inches above the level

of the ground or foundation upon which said platforms or shelves rest. The provisions of this section shall not prohibit the placing of any articles mentioned therein upon the sidewalk preparatory to delivery or immediately after consignment.

Section 823. Any person violating the provisions of section 822 shall, upon conviction, be punished by a fine of not less than ten dollars, nor more than twenty-five dollars, or by imprisonment in the house of correction of Milwaukee county for not less than thirty days nor more than ninety days, in the discretion of the court.

Conservation of resources will naturally follow conservation of health.—Fisher.

LIBERTY BREAD, WITH OATS.

(BY THE MILWAUKEE COUNTY COUNCIL OF DEFENSE)

THE RECIPE

Pour 2 cups boiling water over $1\frac{1}{2}$ cups rolled oats; add 2 teaspoons salt, $\frac{1}{4}$ cup brown sugar, and 1 tablespoon fat. When cooled add cake yeast dissolved in $\frac{1}{4}$ cup lukewarm water. Measure 5 cups white flour, and stir in enough to make a stiff dough; let rise until doubled in size; mould into 2 loaves, using the rest of the flour. Put into greased pans, let rise again and bake one hour.

The fat may be omitted from this recipe, $\frac{1}{2}$ cup of bran or a mixture of bran and cornmeal may be substituted for $\frac{1}{2}$ cup of the white flour, whole flour may also be substituted in larger quantities.

There seems to be an impression among some that the War or Liberty bread is not as good as the ordinary white bread, and that the Council of Defense is asking the people to starve themselves to that extent.

Such is not the case. This bread is actually a better food than that made from patent wheat flour. Oatmeal, of which the Liberty Bread now in the market contains at least 25 per cent, is richer in all the substances which build up and maintain the human body than is wheat.

Oatmeal contains 15.6 per cent of proteins to 11.8 in patent wheat flour. Fats are the heat or energy-produc-

ing foods. Oatmeal has 7.3 per cent of fat; patent wheat flour has only 1.1 per cent. Mineral matter is found in all the digestive juices. Oatmeal has 1.9 per cent of mineral matter. Patent wheat flour contains only .5 per cent.

In urging the eating of Liberty Bread the Defense Council is not asking anyone to deny themselves food. There is no need of such denial at present. But it is urging that the burden borne by the wheat-bread making be shared more equally with the other grains, which furnish just as much, in some instances more food to the human body than wheat.

A MESSAGE TO PARENTS.

Give thought now to the opening of schools, in September.

No child should be sent to school until its physical as well as mental fitness for school work has been passed upon by a competent physician. Vaccinate before not after school starts.

Defective teeth, eye trouble, adenoids, enlarged tonsils, "colds" (running

nose, sore throat) and other deficiencies in health, should receive prompt attention.

Be sure that children only recently recovered from contagious diseases are examined to determine freedom from disease.

By contact with unsuspected "carriers" who are not ill, and mild cases

of contagious diseases (possibly considered lightly as "a little cold" or "a rough throat"), the disease resistance of school children is severely taxed. There is a sudden change from out-of-doors to crowded school rooms; from freedom to anxiety over new lessons.

Either viewpoint—the interests of the sick child, and the interests of the well child—surely demands willing and intelligent co-operation of parents and teachers with health officials.

Consider again the second paragraph of this little message.

DIVISION OF SANITARY INSPECTION, JULY 1917.

No. of orders served.....	1942
No. of complaints received.....	2108
No. of inspections made.....	6221
No. of cultures del. and col....	124
No. of visits to quarant. houses...	1028
No. houses placarded	286
No. houses disinfected	278
No. calls by ambulance	63
No. visits to schools	—
No. funerals attended.....	8
No. arrests	16

DR. T. F. THOMSON,
Chief Sanitary Inspector.

WRITE FOR THESE BOOKS ON PRESERVING FOOD

Practical Directions for Preserving Native Fruits and Vegetables. Adams, Mrs. L. H., and Sandston, E. P., 3 p. April, 1906. (Ask Wisconsin Agricultural Experiment Station, Madison, Wis., for Bulletin No. 136.)

Household methods for making jams, jellies, preserves, etc., are described, particular attention being paid to the use of native fruits. A few

directions for canning vegetables are also given.

Canning for Pleasure and Profit Kelley, Elizabeth, B. 16 p. illus. Jan. 1917. (Write to Wisconsin College of Agriculture, Extension Service, Madison, Wis., for circular No. 68.)

This includes directions for making a home-made canner, detailed directions for canning tomatoes in glass and tin by the cold-pack process which the author states may be used in canning practically all vegetables. Includes tables for canning vegetables and fruits in tin and in glass.

WASTE OF COUGHING.

Coughing is largely a habit and often may be controlled. The spitting habit is much more unnecessary. It would be well for the public to adopt the slogan *Don't spit. Don't cough if you can help it.*

If one must cough and the inclination cannot be controlled, a folded handkerchief of paper or cloth should be held firmly over the mouth. The handkerchief smothers the noise and prevents the flying into the air of all mouth and nose secretions which carry infection.

According to the MEDICAL CRITIC AND GUIDE, a patient statistician has calculated that a person who coughs once every quarter-hour for ten hours expends energy equivalent to 250 units of heat, which may be translated as equivalent to the nourishment contained in three eggs and two glasses of milk. In normal respiration the air is expelled from the chest at the rate of four feet per second, whereas in violent coughing it may attain a velocity of three hundred feet.

FIRST AID TO THE DROWNING.

(The Schaeffer Method)

Remove the victim to fresh air as quickly as possible. Rapidly feel with the finger in his mouth and throat and remove any foreign body (tobacco, false teeth, etc.); then begin artificial respiration at once.

Lay the subject on his stomach, with the arms extended as straight forward as possible and with the face to one side, so that the nose and mouth are free for breathing. Let an assistant draw forward the subject's tongue.

Kneel straddling the subject's thighs and facing his head, rest the palms of your hands on his loins (on muscles of the small of the back), with fingers spread over the lowest ribs.

With arms held straight, fingers forward slowly swing forward so that the weight of your body is gradually and without violence brought to bear upon the subject. This act should take two to three seconds.

Then immediately swing backward so as to remove the pressure, return-

ing to the first position. Repeat regularly 12 to 15 times per minute the swinging forward and backward, completing a respiration in four or five seconds.

As soon as this artificial respiration has been started and while it is being conducted, an assistant should loosen any tight clothing about the subject's neck, chest or waist.

Continue the artificial respiration without interruption until natural breathing is restored (if necessary, two hours or longer) or until a physician arrives and takes charge. If natural breathing stops after having been restored, use artificial respiration again.

Do not put any liquid in the patient's mouth before he is fully conscious.

Give the patient fresh air, but keep him warm.

Send for the nearest doctor as soon as the accident is discovered.

Free Lectures For Mothers.

A splendid programme of free lectures is offered this season at the Infants' Fresh Air Pavilion in Waterworks park, to mothers and others who are interested. The pavilion was opened for the season early in July. Little patients from one year up are being cared for.

Younger children are, if otherwise acceptable, provided for elsewhere.

In this good work, the Health department gratefully acknowledges

the assistance of the Woman's Fortnightly Club, and of a staff of physicians headed by Dr. J. Gurney Taylor, who are giving their service freely and gratuitously. Drs. George H. Fellman, A. W. Gray, R. M. Hall, Clarence F. Hardy, Oscar Lotz and A. W. Myers form the staff.

The programme of free lectures follows: July 12, Dr. Walter G. Darling, "Care of Mother Before Child Birth"; July 19, Dr. A. W. Gray, "Breast Feeding"; July 26, Dr. A.

W. Myers, "Artificial Feeding of Infants"; August 2, Dr. A. L. Kastner, "Hygiene and Care of the Baby"; August 9, Dr. J. Gurney Taylor, "Acute Diseases of Infancy"; August 16, Dr. Oscar Lotz, "Contagious Diseases of Infants"; August 23, Dr. George H. Fellman, "Chronic Diseases of Infants"; August 30, Dr. George R. Ernst, "Tuberculosis in

Children"; September 6, Dr. Clarence F. Hardy, "Accidents and Emergencies of Childhood."

The pavilion is easily reached with Farwell avenue street cars, to St. Mary's hospital. Guide boards indicate the way to the pavilion which is located on the lake shore east of St. Mary's and the pumping station. Come, and bring your neighbor.

WHEN WILL THE FRAUDS STOP?

Can you imagine a worse form of waste—particularly now that the nation is obliged to do its *utmost* by way of conservation—than to spend good, hard-earned, needed dollars for worthless, fraudulent or unqualifiedly dangerous patent medicines?

The easiest prey of these frauds usually are those people least able to afford being victimized. Isn't that correct?

It is a splendid thing that the whole nation has risen up to demand the elimination of waste. Isn't it unfortunate that, side by side with able editorials on such topics by the brightest minds in journalism, are run advertisements of the rawest kinds of medicine fakes and frauds?

Have you noticed how the claims of the frauds are made more guardedly now than ever? How they have assumed a war-time flavor? "To feel fresh and fit just take So and So's Pills," says one big headline. Of course, the nice, benevolent person who makes the pills wouldn't think of such a thing as to take advantage of the country-wide campaign for the conservation of man-power and general good health. He wouldn't *soak* ignorant and poor people grasping at straws! No, not just for profit—indeed, no!

Then runs an advertisement, "Too Weak To Fight?" It tells how some dope is going to cure every ailment that ever happened, besides preventing a host of others from ever happening. Nothing new in that sort of bunk—but, get the "fight" angle.

Suppose that the frauds were only harmless. Who can afford to be mulcted with a bottle of water doped up with a fancy name and a bit or two of a drug, and sold for a price that is "miles" in excess of real value?

But the stuff *isn't only harmless*. in about 99 cases of 100. It is usually positively if not viciously *dangerous*. If the charge of excessive prices were the worst that could be made, the situation would be far simpler than it is. The sad fact is that nostrums not only literally "skin" their victims, but even make drug fiends of helpless babes.

Will the frauds let up in the face of conditions that require every one in this country—rich as well as poor—to practice economy and conservation?

Is there a limit that they dare not exceed in their despicable business of getting the dollars of the unfortunate, the poor and the ignorant?

THE ACCIDENTS OF SUMMER.

BY DR. JAMES PETER WARBASSE, IN "MEDICAL SOCIOLOGY."

The newspapers and the medical press are prone to call attention to the "accidents of summer." In the cities, each Sunday or holiday has its calamities; and the country and seashores every day report disasters which have overtaken the seekers after summer rest and recreation. These accidents and deaths are particularly pitiful, and even dramatic, because they occur in the midst of merry-making and happiness, and not in the presence of grim and dangerous occupations.

I have never seen the real reason assigned for these misfortunes. Possibly, because it is so simple, it has been overlooked.

"IT CAN'T BE DONE," SAFELY!

Briefly, the explanation is to be found in the tendency of persons engaged in strenuous business life, when the opportunity for a short vacation presents itself, to seek some diversion which is totally different from their daily occupation, and to apply the same strenuous efforts to "having a good time" as they apply to their everyday vocation. *This can never be done with safety.*

A mill hand works for fifty weeks with his dangerous machinery and is not hurt, because he is familiar with it; but when he steps in a cat-boat and gets mixed up with the tides and weather, trying to have a little fun in two weeks to last him the rest of the year, David Jones is waiting for him. And, on the other hand, the fellow who sails a boat all the year had better keep his fingers out of the wheels of the mill.

THE OFFICE MAN GOES HUNTING

For eleven months the pale-faced bank clerk has grown soft and flabby, with his eye on his ledger page. He has had his cocktail before dinner, and at night over his pipe has sat about the grill-room campfire and dilated upon the merits of smokeless powder, while the hands of the tall clock in the corner have become scarcely visible through the thickening smoke. His oculist adds a diopter or two to his glasses; and in the late fall he packs his paraphernalia and plunges into the woods. He tries to make himself look like a half-breed, and thinks that he does; but his guide smiles a deep smile that shows not on his placid face.

Now, if you look any more like a deer than a well curbed doe, my advice to you is to keep out of the banker's range, or there may be another of these "accidents of the summer." And the native woodman would make just as bad a mess at figuring discounts.

IN THE BATHING SUIT

The prince of the ballroom and the afternoon tea never really has an opportunity to display his manliness until he gets into his bathing suit. The undertow and a breaker or two start in to eat him up, and they get away with him so far that Sylvester's method, for three steady hours, leaves him cold and limp. And the tough old life guard would cut a sorrow figure in the cotillion.

The mistake made by our summer vacationist is to plunge into vacation with the confidence of vocation;

and in these strenuous days there is too wide a distance for safety between the two.

The cheap seaside resorts vie with one another to furnish their patrons with new sensations; and the frequenters of these places get so much for a small outlay of money that they find the attractions irresistible. All sorts of death-inviting devices shoot people like catapults down grades, up grades, and through the air.

AN INDICTMENT

The ingenuity that has been expended in contriving machines to give people, in the bloom of health, an opportunity of coming up to the death line, almost to the crossing place, feeling the cool breath of eternity, and then receding in the exhilaration of safety, would solve many a human problem if applied to that end. Un-

fortunately, the insanity of amusements of our seaside resorts does not give recreation. Most of the patrons of Coney Island find themselves worse off for it on Monday morning.

All of these conditions cause an approach to the danger line in vacation time. *The labors of the men and women who toil should so be regulated that recreation is intermingled with work in wholesome proportions. No country or people in the world are so deficient in the practice of sensibly interspersing labor with play as the Americans.* The average American, who is fighting his way to business success, does not know how to play or to take recreation. We lack appreciation of restful pleasures.

There is little that the law can do. The defect is manifestly a fundamental one, and lies in our sociological economic conditions.

Put Resort Typhoid "Out Of Business".

Why can't "summer resort typhoid" be put out of business just as successfully as the army has ended the ravages of this disease in its encampments? Immunization (vaccination) against typhoid did the trick among the soldiery. Such immunization is, of course, available to all civilians who will take enough interest. It is compulsory in the military.

So far as suspected water is concerned, an easily available method for the use of tourists, motorists and summer resorters can be heartily recommended by the Health Department: Procure calcium hypochlorite tablets (20 to 30 milligrams of available chlorine per tablet).

Dissolve one tablet by crushing between the fingers in one quart of

water in an ordinary Mason jar, which should be sealed with an airtight cap. The jar is then shaken, contents allowed to settle, and should be stored in a cool, dark place. This is the stock solution and under average conditions will last about one week, after which it should be renewed.

To prepare water for drinking, take one teaspoonful of the clear stock solution, avoiding the sediment, to one eight-ounce glass of drinking water; allow it to stand for 5 minutes, when it is ready for drinking and will be safe. If it is suspected that the water is heavily polluted, two teaspoonfuls of the stock solution should be used to each eight-ounce glass of water.

HOW TO SELECT RIGHT FOOD EASILY.

For Housekeepers Seeking Rations That Are Truly Economical
For The Money Spent.

To plan out meals in the interest of family efficiency and economy at the same time, the housewife fortunately does not need to do elaborate sums in calories or to have any intimate understanding of such terms as "protein" and "carbohydrates."

If she will group the various foods into *five simple groups* and will see that foods from each appear in each day's meals, she can feel sure that she is giving her family the eight different substances which the body needs for well-being. This grouping will also help to simplify her meals without making them one-sided or incomplete, as well as save money. The following groupings are approved by experts of the U. S. Department of Agriculture:

GROUP I.—FRUITS AND VEGETABLES.

Without these the food would be lacking in mineral substances needed for building the body and keeping it in good working condition; in acids which give flavor, prevent constipation, and serve other useful purposes; and in minute quantities of other substances needed for health. By giving bulk to the diet they make it more satisfying to the appetite.

Foods depended on for mineral matters, vegetable acids, and body-regulating substances.

FRUITS.	VEGETABLES.
Apples, pears, etc.	Salads — lettuce, celery, etc.
Berries.	Green peas, beans, etc.
Grapes, lemons, etc.	Tomatoes, squash, etc.
Bananas.	Potherbs, or "greens."
Melons, etc.	Potatoes and root vegetables.

GROUP II.—MEAT AND MEAT SUBSTITUTES.

These are sources of an important body-building material—protein. In the case of children part of the protein food should always be whole milk.

Foods depended on for protein.

Milk, skim milk, cheese, etc.	Fish.
Poultry.	Dried peas, beans, cow peas, etc.
Eggs.	Nuts.
Meat.	

GROUP III.—FOODS RICH IN STARCH.

Cereals (wheat, rice, rye, barley, oats, and corn) and potatoes (white and sweet). Cereals come near to being complete foods, and in most diets they supply more of the nourishment than anything else.

Foods depended on for starch.

Cereal grains, meals, flours, etc.	Crackers.
Cereal breakfast foods.	Cakes, cookies, starchy puddings, etc.
Bread.	Potatoes and other starchy vegetables.
Macaroni and other pastes.	

GROUP IV.—SUGAR.

Unless some of the fuel is in this form the diet is likely to be lacking in flavor.

Foods depended on for sugar.

Sugar.	Candies.
Molasses.	Sweet cakes and desserts.
Syrups.	Fruits preserved in sugar, jellies, and dried fruits.
Honey.	

GROUP V.—FOODS VERY RICH IN FAT.

These are important sources of body fuel. Without a little of them, the food would not be rich enough to taste good.

Foods depended on for fat.

Butter and cream	Salt pork and bacon.
Lard, suet, and other cooking fats.	Table and salad oils.

CURRENT COMMENT ON PUBLIC HEALTH.

CULLED FROM CONTEMPORARY HEALTH PUBLICATIONS.

WHITE ZONES.

The movement to clean up and keep clean the army training camps by establishing so-called "white zones" around them is not the mere hobby of any purists or professional reformers, but is an earnest government activity * * * venereal diseases are now coming into full recognition as a public health problem and are being treated as such by Federal authorities.—*Ohio Public Health Journal*.

TRY THIS

From now until September one can get along with about half as much meat, eggs, rich pastries and other heat producing foods, as are needed during the cold weather months. Try it and see how much better you feel.—*Chicago Bulletin*.

ADULTS WHOOP

Mr. and Mrs. X, prosperous farmers in the state of Indiana, were in attendance at a public meeting held in the community church. A woman with a baby in her arms, on account of violent paroxysm of coughing in the baby, rose to remove the infant from the congregation. Mrs. X, to be helpful, opened the door, and just as she did so, the baby coughed violently and she felt its hot breath in her face. Within seven days she developed whooping cough. Later her husband developed it. The doctor's bill, the nurse, medicines and loss of time incident to this experience amounted to \$600 according to the

estimate of Mr. X.—*Indiana State Health Bulletin*.

REMOVE PAPER

Fresh meats should not be left in the paper that is about them when delivered from the butcher shop, as the wrapping paper will absorb the juices. Remove the paper and wipe the meat with a clean cloth that has been wrung out in cold water, and then place it in a dish.—*Chicago Bulletin*.

"I," NOT "WE."

But just the moment women change the thought in their hearts from "We must conserve food" to "I must conserve food," the battle is well begun.—*Rhode Island State Bulletin*.

WHY NOT?

One can hardly pass a day without being reminded to be "economical" and to "do his bit." All of which we approve, but we add, stop buying worthless patent medicines, thereby saving your health and money.—*Cumberland, Md., Bulletin*.

THE NATION'S FOOT

Weak Foot is one of the holdbacks of the present day civilization. There should not only be a timely and vigorous campaign of education in the matter of proper footwear, but also there should be aroused a deepened public opinion against shoes which are abnormal in shape and which bring defects into the human body.—*Exchange*.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

July, 1917.

Annual Death Rate per 100.....	11.58	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	27.38	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	6.2	Annual Death Rates, Females.....	5.3
Annual Birth Rate, Males.....	14.9	Annual Birth Rate, Female.....	12.5
Death Rate less, Violence.....	10.4	Birth Rate less, Still Born.....	26.5

Deaths recorded	425	Births recorded	1004
Marriages	346		

BIRTHS.

SEX.	COLOR.	REPORTED BY	NATIVITY OF PARENTS.	BY WARDS
Males.....	White.....		Father Mother	First
Females.....	Colored.....			Second
				Third
Physicians		724		Fourth
Midwives		258		Fifth
Others		22		Sixth
				Seventh
				Eighth
				Ninth
				Tenth
				Eleventh
				Twelfth
				Thirteenth
				Fourteenth
				Fifteenth
				Sixteenth
				Seventeenth
				Eighteenth
				Nineteenth
				Twentieth
				Twenty-first
				Twenty-second
				Twenty-third
				Twenty-fourth
				Twenty-fifth
				Hospitals
				Pairs of twins.....
				Triplets
				Illegitimate
				Still born

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	67	66	White	343	344
Youngest	19	15	Colored	3	2
Widowed	29	20	Others	—	—
Divorced	15	15			

NATIVITY.

	Groom	Bride		Groom	Bride
Milwaukee	6	7	England	6	2
Wisconsin	183	232	Holland	1	1
United States	52	27	Norway	3	2
Germany	22	20	Slavonia	0	0
Poland	9	11	Hungary	10	10
Austria	21	21	Russia	17	7
Bohemia	1	1	Canada	1	0
Sweden	0	0	Greece	3	0
Italy	4	4	Elsewhere	7	1
Roumania	0	0	Total	346	346

AGE.

	Groom	Bride
Under age	24	11
Under 25	110	215
25 to 35	170	91
35 to 45	30	18
45 to 55	7	5
55 to 65	4	1
65 to 75	1	1
Over 75	—	—

RESIDENCE.

	Groom	Bride
Outside State	18	6
Outside City	31	31
Married outside State.....	10	10

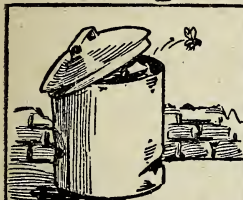
CEREMONY.

By Judges	37
By Justices	13
By Ministers	296

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July
Total Deaths.....	315	403	419	395	470	534	527	635	571	479	451	425
Annual Death Rate.....	10.46	11.24	11.69	11.02	13.12	14.56	14.37	17.31	15.67	13.06	12.3	11.58
Cases and Deaths.....	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases
Typhoid Fever.....	21	14	5	3	17	4	9	6	13	2	2	1
Measles.....	16	0	0	0	2	2	32	11	13	4	8	2
Scarlet Fever.....	46	0	0	0	26	44	433	12	135	0	337	174
Whooping Cough.....	209	100	68	169	248	396	433	564	744	10	244	102
Diphtheria.....	9	0	51	2	85	98	54	177	167	233	175	145
Influenza.....	1	0	6	11	9	116	67	50	53	5	66	9
Small Pox.....	1	0	0	2	82	1	7	4	1	0	0	0
Poliomyelitis.....	4	1	0	0	0	0	0	0	4	0	23	0
Tuberculosis Pulm.....	99	16	0	22	55	75	52	95	98	28	103	90
Cancer.....	37	28	2	33	38	31	27	6	25	10	25	26
Meningitis.....	16	18	4	24	22	4	24	27	9	12	5	25
Org. Heart Disease.....	25	32	18	34	42	4	32	48	46	35	53	40
Bronchitis.....	5	4	5	8	16	16	27	16	7	7	10	4
Pneumonia.....	27	21	37	33	78	117	125	147	116	72	39	25
Diarrhoea—Under 2.....	36	51	16	14	17	14	16	20	21	20	19	6
Nephritis.....	24	22	27	35	32	34	26	35	26	37	25	35
Congenital Debility.....	24	31	16	35	31	28	26	21	31	24	23	36
Senility.....	6	6	9	9	5	16	15	16	5	6	9	7
Violence.....	40	24	22	28	25	28	26	26	35	19	38	43
Suicide.....	3	3	7	9	4	7	6	6	8	4	5	2
Homicide.....	3	1	1	0	1	0	0	0	3	2	2	2
Under 30 days.....	36	40	42	51	52	51	55	57	53	33	39	50
Between 30 days & 1 year.....	55	18	37	31	34	52	83	68	69	47	17	17
1 to 5 years.....	162	35	31	18	35	35	34	57	50	53	30	27
5 to 60 years.....	162	147	167	169	212	223	205	213	248	203	213	191
Over 60 years.....	92	113	142	126	132	173	165	197	151	136	122	140
Age at Death, all ages.....	35.2	35.4	40.6	40.6	38.	41.2	35.8	37.6	35.5	36.5	36.8	39.2
Age at Death, over 5 yrs.....	51.	53.5	55.	52.8	51.8	55.5	53.6	54.7	50.5	50.3	48.	51.2
Public Institutions.....	89	57	85	106	107	108	123	95	135	109	114	102

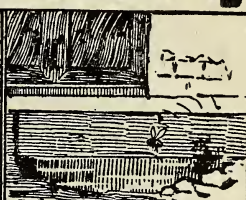
A Day in the Life of a Fly



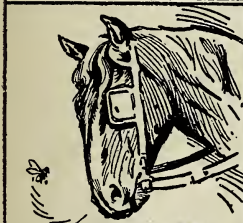
HAVING HAD A GOOD NIGHTS
SLEEP IN AN OLD GARBAGE
CAN I BREAKFAST AND AWAY



TO A BAKERY WHERE I
HAVE SOME DESSERT



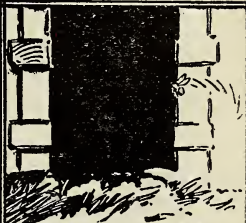
TAKE A DRINK AT A
POOL IN THE GUTTER



LIGHT ON A HORSES
FACE FOR A RIDE



GO FOR A WALK AROUND THE
EDGE OF A DRINKING GLASS



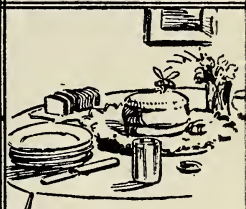
SEE AN OLD STABLE
DOOR OPEN



FIND A DOG ASLEEP
AND TEASE HIM
A WHILE



GO IN A WINDOW IN A
NICE LOOKING HOUSE



AND FIND THE TABLE
ALL READY FOR DINNER



'LIGHT
ON THE
BABY'S
BOTTLE
FOR A
SID OF
MILK



CRAWL AROUND THE
BABY'S FACE FIND
IT VERY SWEET



PASSING BY A
FEW DAYS LATER
NOTICE A WHITE
RIBBON ON THEIR
FRONT DOOR

WHEN JARS AND CANS ARE FULL DRY REMAINING SURPLUS

Dry Surplus Fruits and Vegetables in your Home

There is no difficulty about home drying fruits and vegetables. Sun drying of fruit was a common enough home industry a few years ago.

A few homemade shallow trays and a little mosquito netting are all you need for sun drying.

A few trays bent out of coarse wire netting and fitted like removable shelves into a lath frame are all you need to dry over your range or gas stove or before an electric fan.

Yes. There have been recent improvements in grandmother's successful method. It has been found that currents of air are better than heat in removing surplus water.

Water is all that is taken out; flavor, texture, and food value are not impaired. Soaking and cooking restore the succulent quality so important in the winter diet.

Dried products can be kept in paper containers.

Write today for free Farmers' Bulletin 841, to U. S. Department of Agriculture, Washington, D. C.

(Also, See Page 6, this issue.)

Revive This Home Industry in Your Home

MILWAUKEE HEALTH DEPT

CITY HALL — MAIN 3715

614.09
M64 b.

◆=====Bulletin=====◆

of the Milwaukee

Health Department

*Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.*

GEORGE C. RUHLAND, M. D.
Commissioner of Health, *Director.*

JOHN L. MEYER,
Deputy Commissioner, *Editor.*

SEPTEMBER, 1917.

Vol. 7, No. 9.

Am I
My Brother's
Keeper?

Genesis, 4.

Bulletin of the Health Department, Sept. 1917

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN L. MEYER, Deputy Com'r, Health Publicity.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS JEANETTE HAYS,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

TUBERCULOSIS DIVISION.

Telephone, Main 3715.

Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

The division receives all reports of tuberculosis. Its nurses call on all cases reported unless the physician in charge requests that there be no call.

All cases reported from any source are investigated. If the nurse finds a physician in attendance, he is consulted as to his wishes before the nurse returns to the case.

The division assumes responsibility for the medical and material relief for indigent patients. Its nurses arrange for aid through the County Poor Office, under the tuberculosis pension law, provide means of paying rent and acquiring fuel, and secure the provision of some clothing.

The division uses the dispensaries of the Children's Free Hospital, the Milwaukee Infants' Hospital, the Milwaukee Maternity Hospital, the Milwaukee County Hospital, as well as the various sanatoria including the

State Tuberculosis Sanatorium at Wales, the Blue Mound Sanatorium maintained by the City of Milwaukee, the Social Workers' Sanatorium, and Mairdale maintained by the County of Milwaukee. It also uses the Preventorium for children, maintained by the Health Department.

Tuberculosis nurses give instructions, but do not give bedside care.

The division holds the following regular clinics:

Eighth Floor, City Hall:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

South Side Dispensary—Woolworth Building, Fifth Ave. and Mitchell Street:

Thursday evening, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

North Side Dispensary—Fourth Street and Reservoir Avenue:

Wednesday morning, from 10 to 12 o'clock.

Service at these clinics is rendered without charge.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

SEPTEMBER 1917

"AM I MY BROTHER'S KEEPER?"

By JOHN L. MEYER, Deputy Com'r of Health. *Genesis, 4.*

A serious question!

There can be no doubt of the proper answer.

But, you say, what has this to do with the public health?

Everything!

For, a truer realization by a larger measure of the public, of the mighty meaning comprehended in that age-old question—a fuller realization of what the Golden Rule means, if you please,—will proportionately cut down and throttle the ravages of *communicable disease*, a big burden of not only public health workers, but of all fathers and mothers and children.

There are those who devoutly repeat the golden rule and then freely sneeze into somebody's face, unthinking of the damage (possibly even death) that they are spreading to innocent fellow humans.

Then there are those ignorant of communicable disease, who spread contagion so carelessly.—

Those utterly indifferent to the welfare of others—

The prejudiced; the "quarantine jumpers"; those who wilfully hide cases for one reason or another, including some "too proud to have the house quarantined" or "too nice to tell of a secreted case they know all about."

Of the same stamp are those who, as the U. S. Public Health Service recently said, "carefully select your brand of liquor and then feed your children unpasteurized milk; or go camping out for your health and then place your toilet so that it drains into your water supply."

Let none gather from this that progress is not being made in overcoming prejudice, ignorance and indifference as here roll-called. Much progress has been made!

But, much work is left to be done. Let every citizen help. Back up the Health department. Don't "let it slide." If you haven't little children, remember that your neighbor *has*!

Don't answer, as Cain did, "Am I my brother's keeper?"

List Of Diseases Reportable By Law In Wisconsin.

Cerebrospinal Meningitis

(Epidemic)

Chickenpox

Cholera, Asiatic

Diphtheria

Erysipelas

Mumps

Ophthalmia Neonatorum

Poliomyelitis

Scarlet Fever

Smallpox

Syphilis

German Measles
Gonococcus Infection
Leprosy
Measles

Tuberculosis
Typhoid Fever
Whooping Cough

Quarantinable Diseases.

Cerebrospinal Meningitis
(Epidemic)
Cholera, Asiatic
Diphtheria
Leprosy

Poliomyelitis
(Infantile Paralysis)
Scarlet Fever
Smallpox
Typhus Fever

IN THE WAR SERVICE.

The government has called Dr. George C. Ruhland, Milwaukee's Commissioner of Health, from the city to an officership in the medical service of the army. Important work has been assigned to him.

Local organizations and individuals expressed the wish that Dr. Ruhland would remain here, particularly during war times, to continue the comprehensive public health programme in which he has been so tirelessly active. But, it was necessary to place the military needs of the hour above local interests, important as they are.

In a simple but affecting way, the members of the department upon taking leave of the commissioner, pledged him a loyal and consistent continuation of his policies and programme. Tokens of the friendship and esteem of the staff members for their chief, were presented. The pride of his fellow workers in this occasion, so full of patriotic moment and personal sacrifice, found wholehearted expression.

Dr. Ruhland's early return to Milwaukee, while hardly an immediate possibility at this writing, neverthe-

less is hoped for, particularly by the members of the department and many other Milwaukeeans in civil and public life who are concerned in public health work. Meanwhile the activities which it was hoped Dr. Ruhland could personally continue without interruption, will surely not be neglected. The well-knit, loyal department maintained by the commissioner with the co-operation of the city's officials, medical men and other citizens, assures this.

John L. Meyer,

Deputy Commissioner of Health.

DIVISION OF SANITARY INSPECTION, AUGUST 1917.

No. of orders served.....	2208
No. of complaints received.....	2286
No. of inspections made.....	6625
No. of cultures del. and col....	106
No. of visits to quarant. houses.	514
No. of houses placarded.....	165
No. of houses disinfected.....	137
No. calls by ambulance.....	
No. funerals attended.....	
No. arrests	7

Dr. T. F. THOMPSON,

Chief Sanitary Inspector.

THE RED CROSS SPIRIT SPEAKS.

"I kneel behind the soldier's trench,
I walk 'mid shambles smear and
stench,
The dead I mourn;
I bear the stretcher and I bend
O'er Fritz and Pierre and Jack to
mend
What shells have torn.

"I go wherever men may dare
I go wherever woman's care
And love can live;
Wherever strength and skill can
bring
Surcease to human suffering,
Or solace give.

"I am your pennies and your
pounds;
I am your bodies on their rounds
Of pain afar;
I am *you*, doing what you would
If you were only where you could—
Your avatar.

"The cross which on my arm I wear,
The flag which o'er my breast I
bear,
Is but the sign
Of what you'd sacrifice for him
Who suffers on the hellish rim
Of war's red line."

—JOHN H. FINLEY.

—*National Geographic Magazine.*

Prevention Of Infectious Diseases.

By DR. J. GURNEY TAYLOR, Physician to Milwaukee Infants Hospital.

By infectious or contagious disease we mean disease that can be transmitted or communicated.

These diseases, constantly with us, kill a large number of children and adults yearly, and leave behind a train of cripples.

Many of these cases are preventable. Inasmuch as disease is transmitted by the body secretions and discharges, as those from the mouth, eyes, nose, bladder and bowels, care must be used at all times to prevent these discharges from re-entering another body.

Direct infection from sick to well is chiefly responsible for the spread of infectious disease, although some cases are contracted through water, food, milk, and flies, and articles handled by the victims of disease. By coughing, sneezing, talking or spitting, patients spread disease.

KEEP HANDS CLEAN.

The hands of the patient and attendant are of utmost importance, for they come in touch with the secretions, and most readily transmit disease. It is absolutely important that they should be thoroughly washed frequently.

Control of infectious disease means the careful isolation of the sick from the well, and scrupulous care in looking after the disinfection of the discharges from the body, as well as having those who come in contact with these cases observe the greatest care in their own cleanliness and keeping themselves free from the discharges.

It is necessary to have the sick child separated from the well at all times. First, that it shall not spread the sickness from which it is suffer-

ing, and secondly that it shall secure the rest and quiet which is needed.

There is a period at the beginning of infectious diseases which appears to be especially dangerous, during the time the disease is developing. It is important at this time to have the sick child kept from the well, as he is a positive source of danger.

Too often the child who is ailing is sent to school, either because he wants to go, or because it is more convenient for the family. Children with slight illness, such as cold in the head, upset stomach, headache, sore throat, should never be allowed to be with other children, at home or out of it. For these little upsets may be the beginning of a serious illness, such as measles, whooping cough, scarlet fever, grip, diphtheria or infantile paralysis.

A WARNING.

Furthermore, no child should be exposed to contagious disease in order that he may have it. It is a dangerous thing to do. The very lightest attack of diphtheria may be followed by a paralysis or disease of the heart or kidneys, a mild case of measles may end in tuberculosis or a fatal pneumonia, a mild case of scarlet fever may be followed by inflammation of the heart, ear, or kidney disease, and whooping cough may end in tuberculosis, paralysis or rickets. In many cases of infectious disease the complications may be decidedly more serious than the disease itself.

Smallpox is very fatal to infants and can be prevented by vaccination, therefore every child should be vaccinated before six months of age, and again at seven years.

Every sore throat should be examined early by a competent doctor, in order that diphtheria may be discovered, if present, for the earlier antitoxine is given the better is the chance of recovery.

FOLLOW GOLDEN RULE.

To control infectious disease the Health Department must know at the earliest time when and where the disease exists, in order that they can take steps at once to prevent the sick ones from passing the infection on. Follow the Golden Rule: "Do unto others as you would that they should do unto you." This report should come either through the family physician or the people themselves.

The Health Department should be looked upon by the people as their best friend and aid, which stands ready at all times to help to control the spread of disease, thus making safe the lives of the people, their children and their friends. In this effort parents, teachers, nurses and physicians should unite in giving prompt co-operation to stamp out all infectious disease existing within our city. It is only by securing an absolute and early separation of the sick from the well that all such disease can be wiped out.

POPULAR.

Johnny was very much excited in school all morning, and finally burst out—

"We have a baby girl at our house, teacher; Dr. Moore brought her."

Immediately another small hand waved frantically, and a little voice piped up: "We take off him, too, Miss Brown!"

ABOVE ALL—YOUR BEDROOM.

YOU spend more of your life in your bedroom than in any other room. Make that room—the first you see in the morning and the last you see at night—as artistic and restful as you can. Give the windows plenty of exercise!

The Crime Of “Escaping Quarantine”.

A terrific but well-deserved indictment of those who either through ignorance or selfishness and utter disregard of their neighbor's lives, spread infectious diseases by attempts to escape being quarantined, is contained in a recent publication of the Newark, N. J., health department.

“A group of citizens had gathered for a social occasion. Men and women of intelligence were there, and honorable people, all of them, or thought they were. During the evening the subject of quarantine was discussed, and how annoying it is to be quarantined, and all that. Then the little group, or several of the group, began telling how they had avoided quarantine. They related with merriment how each “foiled the doctors” and they seemed to think it a good joke on the health officers.

“There was not a person in the group who would shoot a man in the dark. There was not one who would break into a home and rob it. There was not one who would catch a child in an alley and choke it to death, or wilfully destroy a home with dynamite. Yet none of these

things is any worse than to leave a home that is quarantined and go about the streets.

“Is it any worse for a man to catch a kid in an alley and choke it to death than to inoculate it with the germs of diphtheria and thus cause it to strangle? Would it be any worse to blow up a home with dynamite than to inflict that home with scarlet fever? Should it be a greater crime to pry open a window and rob a residence than to be the cause of typhoid fever entering the home? What is the moral difference between shooting a person in the dark and spreading contagion that kills him?

“The health officers are not issuing quarantine cards for fun. They are not demanding that you stay at home when quarantined simply to “get even” with you for something you have done. They know what they are doing, and they are doing it for the good of the thousands of people of this community. And if you are a law-abiding person you ought to assist the health officers in carrying out their orders rather than scheming to thwart the officers in their work.”

Would you lower taxes? Then you must lessen disease.—Reed.

ORDINANCES YOU SHOULD KNOW

UNWASHED RAGS.

SECTION 912.5. No dealer in rags or in any used fabric shall sell or offer for sale any such rags or fabric except in a thoroughly clean condition; and all rags or used fabric shall be thoroughly washed or laundered by a method approved by the Commissioner of Health before being sold or offered for sale by any dealer.

SECTION 912.6. No manufacturer shall use or permit the use of any unwashed rags or used fabric in any factory, workshop or other place of

employment owned or controlled by him; provided, however, that the provision of this section shall not apply to rags or fabric that become soiled in consequence of actual commercial usage in such factory, workshop or place of employment.

PENALTY.—A fine of not less than five dollars nor more than twenty-five dollars, together with the costs of prosecution, or, in default of payment, to imprisonment in the house of correction for a period of not less than ten days nor more than thirty days.

Dollars And Cents In Public Health Work.

Anent the recent publication of the fact that the per capita appropriation in the city of Milwaukee for Health is only 51 cents in 1917, a very forceful argument for medical and sanitary preparedness upon entering the great war, by George A. Johnson, consulting sanitary engineer of New York, seems applicable.

"The Public Health is the nation's greatest asset," Mr. Johnson says, "yet in the United States quite 650,000 people die annually from preventable causes. The courts have ruled that the average value of a human life is \$5,000. Taking this figure as a basis, the nation's most important asset is thus depreciated in the total sum of \$3,250,000,000 annually. "Were the great war to end today, the battling nations would be saddled with a debt bear-

ing interest in the sum of \$2,000,000,000 per year. The United States when at peace squandered nearly two-thirds as much money in preventable deaths."

The writer points out that "public ignorance" is responsible for "this stupendous annual wastage which is about equal to the total amount of money in circulation."

"To economize in health work is to invite disaster," says the editor of "The American City" in a note prefacing Mr. Johnson's article.

In conclusion he says: "Let us as a nation permit no dulling of our vision, let public health activities and sanitation progress thru the months or even years in which may be engaged in war, with lessening but rather with an increase of the energies employed in this essential activity."

Among The Compensations Of War.

Public health problems that are indeed not less than serious in ordinary times, assume tremendous proportions in the face of a state of war. The war situation is bound to bring out accomplishments and remove inattentions and even prejudices, for the good of the country ever after. One peculiar attitude of aloofness from a subject of most vital concern to the public — reaching into the very homes, firesides and baby cribs — already shows gratifying signs of becoming dispelled. It relates to the problem of venereal diseases. The call for military efficiency, for one thing, is removing the cloak of false modesty which has been held about this problem. The military must and will be protected. Side-stepping will not do. This will reflect favorably upon civilian life.

Incidentally, a sorry day is dawning for the quack and charlatan who has been collecting his despicable toll, steeped in fraud upon unfortunates and misguided.

DO YOU KNOW THE FACTS?

The ignorance of the public of the ravages of these diseases, familiar to every physician of experience, is astonishing. How many people know that, excluding appendicitis, the great majority of abdominal operations performed on young married women are due to gonococcal infection, contracted as the result of ignorance on the part of the husband regarding his own health before marriage? How many know that the question of full recovery from such diseases can only be determined by the most painstaking examination by a skilled physician

and by laboratory tests? How many know that asylums for lunatics and imbeciles are largely filled by the victims of syphilis, or that childless marriages, stillbirths and miscarriages are frequently caused by one of these diseases? How many victims of their own fears and credulity know that many advertising specialists in "diseases of men" have proven on investigation to be the meanest type of fraud, whose advice is worse than useless, and given with the sole aim to extract the last obtainable penny from the unfortunates who fall into his clutches?

RESULTS IN MILWAUKEE.

The confidential advice service regarding sex diseases established in the Division of Sanitation of the Milwaukee Health Department last year in conjunction with the bacteriological laboratory, has been used by hundreds.

Passing over the value of the service to the sufferers and to the public at large where diseases were actually found to exist, one of the most gratifying experiences of the department in this work has been the opportunity to relieve victims of quackery who believed themselves within a step of insane asylums and even the grave, when they did not even have the diseases.

The Wisconsin legislature has added new statutes on the subject of certain sex diseases at its present session. Cases everywhere in the state are now reportable by physicians. Stringent regulations are made to prevent communication of such diseases. Interested persons will do well to look up Chapter 235, Laws of 1917.

The government which does not protect the health of its citizens is neither intelligent nor moral.—Spencer.

HOME EMERGENCY SUGGESTIONS.

CHOKING.—Slap on the back between the shoulders. Raise the child's arms as high as possible above the head. If the object is small, let it go through the body. Have the child eat bread or potatoes. Do not give castor oil or other laxative.

HICCUGHS.—Stop up both ears with the fingers of each hand and drink water slowly from a cup held by some one else. Produce sneezing. Pull tongue out and put a piece of sugar or soda on it. Hold out for a few minutes.

BITES OF INSECTS.—For the relief of bee stings, mosquito, fly, spider, bug and other insect bites, applications of damp baking soda or ammonia water will afford relief.

HYGIENIC SINNERS.

The waitress who carries a napkin under her arm and wipes off your plate with it.

The fruit stand owner who examines on your apple and polishes it on his sleeve.

The cook who tastes from the pot and stirs with the tasting spoon.

The employer who does not supply adequate sanitary facilities for his help.

The street car conductor who holds the transfer slips in his mouth.

The restaurant toothpick and the cigar cutter.

The roller towel.

The milkman who takes the temperature of the milk with his finger.

HOUSE HUNTING HINTS.

How many rooms have sunshine?
Is every room provided with sufficient ventilation?

Are all free from dampness?
Are the walls and ceilings clean and paper and paint in good condition?

Is the bathroom light, bug proof?
Are the plumbing and fixtures in good condition?

Is the basement light, dry?
Are the halls clean and well lighted?

Is there a place for the children to play?

Are there objectionable features, such as stables, manure piles, junk shops or junk yards close by?

Is there good air space about the house?

Is the immediate neighborhood well kept and attractive?

A "little more rent" may mean decreased doctor bills.

A REAL FISH DIET

A story is going the rounds about a letter that Mark Twain once received from a young man who wished to know if fish were the best food for persons, who wanted to learn to write; if so, what kind and how much fish to eat. The humorist replied that he had heard that the phosphorus in fish was very helpful in developing the writer's brain bump. He said it was not an easy matter to prescribe, but if the composition along was a fair sample of the inquirer's present writing ability, he would advise starting off with a fish diet of a pair of whales per day.

CURRENT COMMENT ON PUBLIC HEALTH.

CULLED FROM CONTEMPORARY HEALTH PUBLICATIONS.

"CATCHING" COLD.

At this season of the year, health magazines are crammed to the covers regarding common colds. Overeating, lack of exercise, fresh air and sleep and a hundred other indiscretions of ordinary living are recited as definite *causes* of colds, while, as a matter of fact, all acute colds are due to the contraction of an infection. You can "catch" cold only from a person who has a cold. Soiled handkerchiefs, dirty hands, common drinking cups and eating utensils are generally the vehicles. Overeating, lack of exercise and all of the other "causes" may be predisposing factors by which the individual's resistance is lowered, providing a fertile field for the infection. To keep well, one must live according to the common rules of hygiene, and to avoid a cold he must protect himself from his fellow man who is thus infected—a thing that is more easily said than done.—EXCH.

THE CAMPERS' GOLDEN RULE.

"Leave your camp as you would like to find it. Burn or bury all refuse. Keep the playgrounds of America clean." — QUINCY, CALIF. BULLETIN.

JOINS THE FIGHT.

"The Evening Post feels that it is performing a public service in beginning the publication of a series of articles on the combating of diseases of immorality. The time is past when this matter can be passed over in silence. The entrance of the United States into the war have im-

mensely multiplied the danger, not only to the young men themselves, but to the community as a whole. It is time to look the matter in the face and to change the whole attitude of the community toward its treatment. The "conspiracy of silence" must be broken."—N. Y. POST, July 14.

PREPAREDNESS.

It has been said that it takes 20 to 30 persons at home to keep one man on the firing line. The whole military organization is alert to the necessity of keeping a soldier in proper condition for his duty. While we are thinking in terms of the military, it must be impressed upon the minds of all that the civil population is, after all, the great background of the army and that nothing must be permitted to interfere with the resources at home.—VERMONT STATE BOARD OF HEALTH.

THE CHILDREN'S PORTION.

The American children of 1917 will be the American citizens upon whose shoulders will fall the burdens, perhaps more trying than ours are today. After this war, the whole world will be reorganized and the problems of reorganization will probably weigh most heavily upon these citizens to be. The children of 1917 should be given every opportunity to grow strong. Every child is needed for the future work. Infant welfare workers have never had greater opportunities for important work than they have today.—CALIFORNIA STATE BULLETIN.

Ten Commandments for Disease Prevention.

I. Honor thy City and keep its sanitary laws.

II. Remember thy cleaning day, and keep it wholly.

III. Thou shalt love thy children, and provide for them decent homes and playgrounds.

IV. Thou shalt keep fresh air in thy house day and night.

V. Thou shalt keep clean and in order, thy alleys, thy back yard, thy halls and stairways.

VI. Thou shalt not kill thine own, nor thy neighbor's bodies, with poi-

sonous air and disease breeding filth.

VII. Thou shalt not let the filthy fly live.

VIII. Thou shalt not steal thy children's happiness from them by neglecting their health.

IX. Thou shalt not bear filthy, decayed teeth in thy mouth nor tolerate them in the mouths of those about thee.

X. Thou shalt not spit on the sidewalks, nor on the floor, nor in the street car, nor in any public place whatsoever.

ABOUT CERTAIN TABLETS FOR INDIGESTION.

"Do not diet. Eat what you please, as much as you please, and then some. After each meal take one of Slickem's Mysteriosa Digestive Tablets. These tablets are a scientific combination of seventeen of the best flesh producing chemicals known to medical science. They will make you strong, healthy and vigorous. If you are thin you will get fat. If you are fat you will get thin."

Evidently there must be millions of fools who really believe that you may safely outrage Nature and then escape the consequences by means of a tablet.

If you continue to suppress symptoms of an outraged stomach—turn a deaf ear to Nature's protests—you will find yourself afflicted with a more serious disease than dyspepsia—perhaps Bright's disease, or rheumatism, or hardening of the arteries—and even the nature cure may not

be able to save you from suffering premature death.—HARRY ELLINGTON BROOK.

A GOOD CITIZEN

Does not beat rugs or sift ashes so that the dirt will be blown into other homes, there to fall upon food or to be breathed or inhaled.

Does not throw garbage or ashes at the garbage can instead into it and does not leave it uncovered, thereby endangering the lives of his fellow citizens.

Does not buy his food supplies from careless or ignorant dealers who fail to protect their goods from dirt, flies and human contact.

Does not fail to report to the Health Department conditions which make his town unsanitary and a bad place to live in.

Does not spit upon the sidewalks or in any other public place, thereby making himself a menace to his community.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

August, 1917.

Annual Death Rate per 1000.....	9.16	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	29.	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	5.6	Annual Death Rates, Females.....	3.5
Annual Birth Rate, Males.....	14.5	Annual Birth Rate, Females.....	14.4
Death Rate less, Violence.....	7.7	Birth Rate less, Still Born.....	28.3
Deaths recorded	336	Births recorded	1064
Marriages	335		

BIRTHS.

SEX.	COLOR.	BIRTHS.	BY WARDS	
Males	White	1060	First	26
Females	Colored	4	Second	36
REPORTED BY			Third	23
Physicians	806		Fourth	21
Midwives	252		Fifth	21
Others	12		Sixth	62
NATIVITY OF PARENTS.			Seventh	40
	Father	Mother	Eighth	61
Milwaukee . . .	139	181	Ninth	48
Wisconsin . . .	313	370	Tenth	25
United States ..	118	135	Eleventh	54
Germany	104	79	Twelfth	53
Poland	129	97	Thirteenth	59
Austria	54	50	Fourteenth	78
Bohemia	2	2	Fifteenth	8
Sweden	2	2	Sixteenth	19
Italy	26	18	Seventeenth	38
Roumania	—	—	Eighteenth	15
England	11	4	Nineteenth	26
Holland	1	—	Twentieth	50
Norway	3	2	Twenty-first	27
Slavonia	2	2	Twenty-second	37
Hungary	39	39	Twenty-third	39
Russia	80	63	Twenty-fourth	54
Canada	5	3	Twenty-fifth	26
Greece	9	7	Hospitals	98
Unknown	20	—	Pairs of twins	4
Ocean	—	—	Triplets	1
Elsewhere	13	10	Illegitimate	31
			Still born	26

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	68	66	White	333	333
Youngest	19	16	Colored	2	2
Widowed	23	21	Others	—	—
Divorced	14	11			

NATIVITY.

	Groom	Bride		Groom	Bride
Milwaukee	11	10	England	3	2
Wisconsin	186	218	Holland	—	—
United States ..	47	39	Norway	2	4
Germany	19	9	Slavonia	—	—
Poland	13	14	Hungary	6	2
Austria	13	14	Russia	13	9
Bohemia	1	1	Canada	1	2
Sweden	1	1	Greece	8	7
Italy	6	2	Elsewhere	5	1
Roumania	—	—	Total	335	335

AGE.

	Groom	Bride
Under age	16	11
25 to 35	112	202
35 to 45	152	96
45 to 55	45	18
55 to 65	5	6
65 to 75	4	1
Over 75	1	1

RESIDENCE.

	Groom	Bride
Outside State	39	18
Outside City	20	13
Married outside State.....	11	11

CEREMONY.

By Judges	35
By Justices	13
By Ministers	282

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.
Total Deaths.....	403	419	395	470	534	527	635	571	479	451	425	336
Annual Death Rate.....	11.24	11.69	11.02	13.12	14.56	14.37	17.31	15.67	13.06	12.3	11.58	9.1
Cases and Deaths.....	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths	Cases Deaths
Typhoid Fever.....	14 15	17 3	5 2	10 2	4 2	6 0	13 112	2 135	4 10	4 337	2 174	0 36
Measles.....	68	91	169	248	396	433	744	10	398	11	102	4
Scarlet Fever.....	100	54	271	85	98	4	177	167	233	7	145	3
Whooping Cough.....	51	6	128	82	116	7	50	53	50	5	55	8
Diphtheria.....	0	0	2	1	1	0	4	1	1	0	0	0
Influenza.....	0	0	0	0	0	0	0	0	0	0	0	0
Small Pox.....	6	4	1	1	75	0	0	0	17	0	7	4
Pollomyelitis.....	14	19	77	55	31	28	95	30	90	28	90	25
Tuberculosis Pulm.....	28	41	33	38	37	27	38	25	103	25	26	21
Cancer.....	13	3	4	4	20	4	6	9	12	5	5	2
Meningitis.....	18	34	24	22	44	24	27	28	100	25	25	21
Org. Heart Disease.....	32	40	34	42	44	32	48	46	35	53	40	4
Bronchitis.....	4	8	5	16	16	27	16	15	7	10	4	4
Pneumonia.....	21	37	33	78	117	125	147	116	72	39	25	12
Diarrhoea—Under 2.....	51	16	14	17	14	16	20	21	20	19	6	19
Nephritis.....	22	28	27	32	34	25	35	26	37	25	36	27
Congenital Debility.....	31	16	35	31	28	26	31	31	24	23	22	4
Senility.....	6	6	9	5	16	15	16	5	6	3	37	52
Violence.....	24	22	28	25	28	26	26	35	19	38	43	4
Suicide.....	4	0	9	7	4	6	6	8	4	5	4	13
Homicide.....	1	0	0	1	3	0	0	3	2	2	2	1
Under 30 days.....	40	42	51	52	51	56	57	53	33	33	50	36
Between 30 days & 1 year.....	18	37	31	29	52	68	83	69	54	47	17	32
1 to 5 years.....	35	31	18	35	30	57	50	50	53	47	27	26
5 to 60 years.....	147	167	169	212	223	205	213	248	203	213	191	153
Over 60 years.....	113	142	136	132	173	165	197	151	136	122	140	89
Age at Death, all ages.....	35.4	40.6	40.6	38.1	41.2	35.8	37.6	35.5	36.5	36.8	39.2	34.5
Age at Death over 5 yrs.....	53.5	55.	52.8	51.8	55.5	53.6	54.7	50.5	50.3	48.	51.2	46.5
Public Incubations.....	57	85	106	107	108	123	95	135	109	114	102	89

DAILY HEALTH CHART FOR STUDENTS.

Guide For Boys And Girls In Every Classroom Of The Schools—
Each Period Of The Day An Opportunity.

MORNING: Eat slowly.

BREAKFAST: Fruit, cereals and milk, eggs, bread and butter. Brush teeth.

SCHOOL: Going and coming take 10 deep breaths slowly with shoulders straight and head up. Don't sneeze near another person. Use your handkerchief. Don't spit.

NOON: Wash hands and face. Use soap. Glass of water before eating.

DINNER: Besides meat and potatoes, or rice, eat plenty of vegetables. Eat plain puddings or fruit. Chew each mouthful thoroughly.

AFTERNOON: Walk slowly after eating. Keep cheerful. Play out of doors after school.

EVENING: Clean up. Glass of water.

SUPPER: Plenty of milk, fruit. Eat fish or eggs instead of meat. Fried foods are hard to digest.

NIGHT: Windows open top and bottom. Sleep out of doors when you can.

Hygiene can prevent more crime than any law.—Munsterberg.

National health will be followed by national efficiency.—Fisher.

Neglect the nation's health if you wish to make it decadent.—Billings.

It is within the power of man to drive sickness and disease from the world.—Pasteur.

Milwaukee's health is your wealth — protect it.

Spreading Disease the Greatest Crime

IT was not so many, many years ago that in Europe the crime of sheep stealing was punishable by hanging. It seems impossible that such a law could ever have appeared in any statute book. We have modified our laws mightily in the last few hundred years, have humanized them. But we wonder whether an awakening public conscience will not, in the next century, enact new laws to cover real crimes which now go unpunished.

If a human being killed another, that crime is punishable by death. Yet, if a diseased person, through carelessness, kill a dozen other people, there is no punishment. The man who spits upon the street or in other public places may actually

be a greater criminal than the man who pays the penalty for his crime at the hands of the state. Many of the deaths and most of accidents which annually cost this country hundreds of millions of dollars and unnumbered heartaches could be prevented. *Until they are prevented, they constitute a ghastly indictment of our public conscience.*

We see now that capital punishment for sheep stealing was a crime in itself; when will we see that immunity from punishment for carelessness is an equal crime against public welfare? *When will every individual realize his own full responsibility to his fellows—that each of us is, and must inevitably be, the keeper of his brother's health and welfare?—The Metropolitan.*

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

OCT.-NOV., 1917.

Vol. 7, No. 10-11.

THE GREATER WAR.

"In the various nations engaged in this war, in times of peace, over 6,500,000 die annually from preventable diseases. There have been fewer than 7,000,000 killed in action on all sides since the outbreak of war. Obviously then, all the battles in the interest of humanity and the interests of nations are not fought in the firing line. The perennial warfare waged against the invisible foe is as important — if not more so — than that now waged against those who are threatening the destruction of the very principles of civilization."

Chas. J. Hastings, M. D.,

Bulletin of the Health Dept., Oct.-Nov., 1917

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

LEWIS J. DANIELS, M. D., Commissioner of Health, Director.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS JEANETTE HAYS,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

Blue Mound Sanatorium.

Telephone, Wauwatosa 64.

Visiting Hours: 3 to 5 P. M. Daily.

This institution is intended for the treatment of cases of Tuberculosis, concerning which there is reasonable probability of an arrest no matter in what stage of the disease the patient may be. Emphasis is placed upon graduated exercise, as part of the treatment.

Application for admission must be made to the Chief of the Division of Tuberculosis of the Milwaukee Health Department on the eighth floor of the City Hall.

Preventorium.

Telephone, Wauwatosa 181.

Visiting Hours: Sundays only 3 to 5 P. M.

Since the problem of eliminating Tuberculosis is a problem of child life, the Preventorium has been established for children of tubercular parents and others that are anaemic and apparently predisposed to tuberculosis. Children between the ages of six and fourteen are accepted. As a rule they remain for about six months. During this period the body is made more resistant and any trouble taken care of.

Every child attends school two to four hours daily. The afternoons are largely devoted to nature study and manual training.

Application for admission is to be made at the office of the Tuberculosis Division, City Hall.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

OCTOBER-NOVEMBER 1917

HYDROPHOBIA OR RABIES.

Rabies is one of the oldest diseases as well as being one of great interest. This disease was described as long ago as four hundred years B. C. As early as 1591 people knew that dogs could transmit it to man. In 1803 an extensive epizootic appeared in dogs and foxes in Germany and Switzerland. Between 1700 and 1800 it spread all over Europe and appeared in America. The first case in this country was reported in Boston in 1786 and since then has spread to every state in the Union.

Etiology is unknown, but in all probability due to a micro organism. The virus is found principally in the cerebrospinal system, but is also found in the saliva, milk and pancreatic juice.

The period of incubation is quite variable; between two weeks and six months and some cases have been known to go nearly a year before developing symptoms of the disease.

The period of incubation depends upon several conditions:

1st—The length of time the disease has been developed in the animal that does the inoculating.

2nd—The age of the inoculated person—it is shorter in the young than in the aged.

3rd—The portion of the body inoculated—it is shorter where the nerve supply is rich.

4th—The character of the wound inflicted—deep wounds being fol-

lowed more quickly by the disease than lacerated wounds.

So far as known at the present time, the virus enters the body by wounds only. The virus is easily destroyed by desiccation and light. Direct rays of the sun will destroy it in about three days, while it will resist putrefaction and cold almost indefinitely.

The disease is found in two forms: dumb or paralytic, and furious rabies.

First of all, the history of the case should be taken into consideration. Find out whether a rabid dog has been in the district or not, as it is this animal which most frequently transmits the disease. It will be noticeable that the animal's disposition changes. The quite tractable animal becomes restless, nervous and easily frightened, owing to hypersensitiveness, and as the disease progresses the animal may become so violent that it will howl at times with a peculiarly changed voice. It is during this nervous attack that the animal has a tendency to attack its associates.

There is more or less incoordination due to muscular rigidity which is the first sign of the paralytic stage. Finally there is a complete paralysis of the posterior limbs, which is of the ascending type until the upright position is impossible. In some cases you will find complete coma, and death usually takes place in from four to ten days.

Up to November 1st there have been investigated 304 cases of injury resulting from dog bites. These cases cover the entire city. Forty-one cases were diagnosed positive by clinical and bacteriological examination.

In order to stamp out the disease which is prevalent in this vicinity, co-operation of the owners of dogs will be necessary. All dogs should be muzzled or tied until the disease no longer exists.

DIVISION OF SANITARY INSPECTION.

No. of	Sept.	Oct.
Orders served	1686	1538
Complaints received	1773	1625
Inspections made	5152	5256
Cultures del. and col. ...	117	222
Visits to quarant. houses	470	648
Houses placarded	180	195
Houses disinfected	120	223
Calls by ambulance	39	75
Funerals attended	5	12
Arrests	3	2

ORDINANCES YOU SHOULD KNOW

ROOMING HOUSES.

Section 858.1. Definitions. A rooming house in the meaning of this ordinance shall be any building or structure, or part thereof, in which four or more persons are harbored, received or lodged for hire, or any part of which is let to four or more persons in which to sleep, provided, however, that duplex flats, so-called, or apartment houses actually divided into residential units, shall not be termed rooming house except when such flats or residential units are used for the harboring of four or more persons in which to sleep, hire, or let to four or more persons in which to sleep.

Rooming house—Class A, as used herein, shall mean any rooming house harboring, receiving or lodging four to eight persons, not members of the proprietor's family.

Rooming house—Class B, as used herein, shall mean any rooming house harboring, receiving or lodging nine or more persons, not members of the proprietor's family.

Basement—A story, partly, but not more than one-half its height, below the level of the lot.

Cellar—A story more than one-half its height below the level of the lot.

Proprietor, as used herein, shall mean any person, firm or corporation—whether owner, lessee, manager or agent—in whose name the license, required herein, shall have been issued.

Hotel—So-called, or any place or business holding a hotel license, issued by the State of Wisconsin, shall be excluded from the provisions of this article, so long as this license remains in effect.

Section 852.2. Each sleeping room in any rooming house must have at least four hundred cubic feet of air space for each lodger or person sleeping therein. Each such room must be adequately ventilated, by window space, opening on street, yard or court, equal to one-tenth of floor area of such room. The bedding used therein must be clean. No

such room may be located in a cellar or basement. Every such room must be free from filth and vermin. The walls, floors and ceilings in each sleeping room of any rooming house and the hallways, stairways, toilet rooms or other parts thereof, must be cleaned and properly repaired and painted as frequently as may be required by the Commissioner of Health.

Section 858.3. The Commissioner of Health is hereby authorized to require or make such reasonable rules and regulations as will insure the proper cleanliness of all rooming houses and the proper provision of water, towels, bathing facilities, cuspidors, beds, bedding, mattresses and other furniture or things.

Section 858.4. In every rooming house (Class B) there shall be at least one toilet room for every eight persons. All such toilet rooms shall be entirely shut off from sleeping rooms by a partition extending from floor to ceiling. Each such room shall have proper ventilation to outside air and shall have a window at least three feet square, opening upon a street, yard, court or vent shaft. There shall be provided an adequate number of wash basins and baths, as determined by the Commissioner of Health, and these basins and baths shall be equipped with flowing water.

Section 858.5. No person, firm or corporation shall operate or conduct any rooming house without first being licensed so to do.

Section 858.6. The license required herein must be applied for and is given in favor of the person, firm or corporation actually responsible for and in control of the rooming house to be licensed. Such person, firm or

corporation must file an application on a form prepared by the Commissioner of Health. The Commissioner of Health, by his authorized assistants, shall inspect each rooming house for which application is made, and when the requirements of this article have been met, shall issue a license upon the payment of a fee of two dollars for a rooming house, Class A, and a fee of three dollars for a rooming house, Class B. All licenses so issued are effective until the next succeeding first day of January.

Section 858.7. Every license issued by the Commissioner of Health shall be conspicuously posted in the office, public corridor or hallway of the rooming house for which it is issued and shall remain so posted at all times.

Section 858.8. The Commissioner of Health shall specify on every license issued the number of persons that may be accommodated in the rooming house for which such license is issued, and shall specify not more than one person for every four hundred cubic feet of air space that can ordinarily and safely be utilized for sleeping purposes. No person shall harbor, receive or lodge more persons than are specified on the license so issued; provided that two children under the age of twelve shall be deemed equivalent to one adult person.

Section 858.9. It shall be the duty of the proprietor of every rooming house to report within twenty-four hours to the Commissioner of Health any persons suffering from any communicable disease, and such report shall be made whenever there is reason to believe or suspect that any

person in such rooming house may be afflicted with any communicable disease and especially with smallpox, scarlet fever, diphtheria, measles, chickenpox, typhoid fever, or tuberculosis.

Section 858.91. The licensee of any rooming house shall be responsible for any insanitary condition prevailing within such rooming house, and shall be responsible for the proper observance of all of the provisions of this article. The owner or agent shall be responsible for the proper sanitary condition of the premises upon which any rooming house is located and for the exterior condition of any rooming house.

Section 858.92. Any license granted under the provisions of this article may be revoked by the Commissioner of Health for failure to comply with the provisions hereof. No license issued under the provisions of this article shall be transferable, and every person, firm or corporation must notify, in writing, the Commissioner of Health within twenty-four hours after having relinquished proprietorship or having sold, transferred, or given away, or otherwise disposed of such interest or control in any rooming house, and must file, in writing, with the Commissioner of Health, the name

and address of the person, firm or corporation to whom he, they or it has relinquished proprietorship, or sold, transferred, given away, or otherwise disposed of such interest or control in any such rooming house. No person, firm or corporation may conduct any rooming house, the license wherefor shall have been issued in the name of any other person, firm or corporation.

Section 858.93. Any person, firm or corporation operating a rooming house in the City of Milwaukee without having first been licensed so to do, or any person, firm or corporation violating any of the provisions of this article, shall be subject to a fine of not less than ten dollars nor more than fifty dollars for each day's violation, or in default of payment thereof, to imprisonment for not less than ten nor more than thirty days for the first offense, and to a fine of not less than fifty dollars for each day's violation, or to imprisonment for not less than thirty days for each subsequent offense.

Sec. 2. All ordinances or parts of ordinances contravening the provisions of this ordinance are hereby repealed.

Sec. 3. This ordinance shall take effect and be in force from and after January 1st, 1918.

TAKE NO CHANCES.

If the government will not take chances on typhoid fever, but compels all soldiers to be vaccinated, you can not afford to take chances either. Therefore, get vaccinated now!—KANSAS BULLETIN.

GREAT STUFF!

Joe—Did that patent medicine for deafness really help your brother?

Mike—Sure enough; he had not heard a sound for years, and the day after he took that medicine he heard from a friend in Australia.

THE PREVALENCE OF CANCER.

By THE AMERICAN SOCIETY FOR THE CONTROL OF CANCER.

A MENACE TO THE INDIVIDUAL.

Cancer is of great frequency at ages over forty than tuberculosis, pneumonia, typhoid fever, or digestive diseases.

At ages over forty, one person in eleven dies of cancer.

Cancer is one of the chief causes of death. The annual mortality in the United States is estimated at 80,000, compared with about 150,000 deaths from pulmonary tuberculosis. While the "great white plague" prevails at all ages, cancer is essentially a disease of adult life. At ages over 40 cancer causes one death out of every eight among women and one out of every fourteen among men. Of the 80,000 estimated deaths from this disease in our country at all ages during the year 1915, approximately 67,600, or 84.5 per cent, occurred at ages of 45 and over.

A MENACE TO SOCIETY.

Cancer respects neither race, creed, nor social position.

It is the common enemy of all mankind, attacking rich and poor alike.

Its insidious onset occurs at the most useful period of life; and death is most common at the age when the care and guidance of children and the continuance of business responsibilities make the mother and father the most useful members of society.

A MESSAGE OF HOPE.

Yet cancer is not a hopeless, incurable disease.

If taken at the beginning, the majority of cases of cancer are curable.

Practically all cases will end in death if let alone.

The only cure for cancer is to remove every vestige of the disease.

The only sure way to do this is by a surgical operation.

LOCAL BEGINNING.

The occurrence of cancer in the individual is usually associated with some form of injury or long-continued irritation of body tissues.

Cancer is at first a local disease.

It is easily cured if promptly recognized and at once removed by competent treatment.

It is practically always incurable in its later stages.

EARLY RECOGNITION.

The disease rarely causes pain at first, and therefore may be too easily neglected during the early and more hopeful stages.

Records of our best hospitals prove that the chances of cure are very high with early operation, and that these chances decrease with every day of delay.

Early diagnosis is therefore all-important.

Learn the danger signs.

CANCER OF THE BREAST.

All lumps in the breast should be examined by a doctor. Do not wait until there is pain.

CANCER OF THE UTERUS.

Persistent abnormal discharge should arouse suspicion, particularly if the discharge is bloody.

The normal change of life does not lead to increased flowing, which is always suspicious, as is the flowing after it has stopped.

Any change in the amount or frequency of the usual discharges is suspicious.

These symptoms demand an examination to determine if a cancer is or is not present.

CANCER OF THE SKIN.

In external cancer there is something to be seen or felt, such as a lump or scab, or an unhealed wound or sore. It may start in a wart or mole that has been irritated.

The disease usually begins in some unhealthy spot or some point of local irritation.

Pain is rarely present.

INTERNAL CANCER.

Cancer inside the body is often recognized by symptoms before a lump can be seen or felt. Persistent indigestion, with loss of weight and change of color, is always especially suspicious.

WHAT TO DO.

Fear the beginning of cancer.

Never be afraid to know the truth.

Any painless lump or sore appearing upon your body should be examined by your physician.

By the time a cancer becomes

painful the best chance for its cure has passed.

But even a painful cancer can be removed permanently if it has not extended too far beyond the place where it began.

If you notice that a wart, mole or other "mark" begins to change in appearance or to show signs of irritation, go to a physician and have it completely removed. Do not wait until you are sure it is cancerous.

HELP EDUCATE OTHERS.

The American Society for the Control of Cancer, Boards of Health, women's clubs, etc., are spreading nationwide the message of courage and hope in early recognition and prompt operation.

By publishing circulars and articles in newspapers and magazines, and by organizing lectures and public meetings, these agencies are conducting a general campaign of education based on the latest knowledge of the disease.

Help disseminate the facts.

MEDICINE USELESS.

Medicine which relieves pain does not have any effect upon the disease itself; it simply produces a period of freedom from discomfort and therefore delays the proper treatment.

WINTER AIR.

Everybody realizes the fact that fresh air is necessary to maintain good health, and almost everyone knows that it is just as needful in the winter as in the summer time. It is a recognized fact that the fresh

air we get during the cold season is more invigorating than that which we get in the summer. But the effect of the discomfort caused by the cold is such that we do not consistently and persistently carry out our good

resolutions to get fresh air night and day at any cost. Our city is full of self-styled "fresh air fiends" who open their bedroom windows a stingy half inch on ordinarily cold nights, and close them entirely when the thermometer comes within ten degrees of zero.

Why do we not keep up a never-relaxing endeavor to get all we can of this cold, clean, delicious air at the time we need it most? Deep breathing practiced during the walk home at night after a long hard day spent in the factory, behind the counter, or in the office chair, will do more to dispel weariness than hanging on to a strap and breathing the vitiated air of the street cars. Housewives may do a great deal of their work with the windows open, babies

may sleep and children may play out-of-doors during the greater part of the day, and everybody can get six, seven, eight or nine hours of fresh air every night by sleeping with bedroom windows open. With proper bed clothing, the coldest-blooded person may sleep with comfort in absolutely unheated rooms with windows open, and in time they will grow less cold-blooded.

Bed and personal clothing suitable for winter months are necessarily rather expensive for many purses, but make an effort to get the best, and, if need be, do without the fine raiment. Any woman who would put expensive clothes and unnecessary finery before pin kcheeks, sparkling eyes, and a total absence of headaches, does not deserve good health.

BRAIN FAG.

The tendency of the day is to squander our reserve of nervous energy, because we are living under high mental pressure.

The cure depends not so much in working less as in taking thought what we do after working hours.

Osler advises the cultivation of a hobby, Cabot says to "play"—in the right spirit.

The essential thing is to get recreation that really relaxes, that restores, that affords refuge from to-day's cares and fortifies against to-morrow's. And here no one individual can dictate to another. For the

man who works with his hands it may be something like reading or music, which will occupy his brain; to the man who works with his brain, it may be something which will occupy his hands. Each has to pick for himself some recreation that he enjoys and that he knows out of his own experience does him good.

But the first thing necessary is to appreciate the physiological truth that the nervous energy spent to-day must be restored by to-morrow; otherwise the individual will run down and will ultimately pay the price of "exhausted reserve."

EAT LESS FOOD AS YOU GROW OLDER; IT IS TRUE ECONOMY.

When people have passed middle life they should realize that to maintain the same degree of efficiency they must take greater care of themselves. This is particularly the case with regard to eating and drinking. People as they grow older begin to learn that they cannot take the same chances with their stomachs and "get away with it" successfully. These protests by the stomach and alimentary canal are officially registered as stomach aches, indigestion, dyspepsia and so forth, and the usual result is a feeling of malaise and headache.

Unfortunately it is at this age, when other interests in life are beginning to wane, that the interest in eating and drinking usually increases, and the pleasure of the table often constitutes one of the chief charms of existence.

Instead of indulging in more elaborate and highly seasoned cooking, people should, after reaching the age of 35 or 40, begin to eat less food and more wholesome food. The organs of excretion and in fact all the organs of the body have attained their greatest degree of efficiency, and, just like an engine that has seen good active service, they must receive more careful instead of more reckless treatment.

When too rich a mixture of gasoline and air is fed to a gas engine carbon is deposited on the cylinders and there is a loss of power. When too much coal is fed into a furnace

the furnace does not yield as much heat and there is too much ash and clinkers left. So it is in the human body; overfeeding leaves a surplus of ashes and residues which have to be removed and not allowed to accumulate in the system.

As we grow older we become less active, and the food which we consume is not as likely to be burned up so completely and, therefore, it is wise to cut down the diet, or in other words use less coal. If not, more work will be thrown upon the liver, kidney and other excretory organs whose function it is to get rid of this superfluous waste. Worse than that, the excess of food is apt to decompose in the intestinal canal, producing toxins or poisons, which are absorbed and have a bad effect on the heart and blood vessels. Within the past few years such poisons have been extracted by scientific men from loops of the intestinal canal of dogs suffering from intestinal obstruction, which are so poisonous that they have, when injected into other healthy dogs, quickly killed them.

To keep well as we grow older therefore means greater care in the selection of wholesome foods, eating no more than we require, and seeing that our alimentary tract is kept in the best possible working condition. Fresh air, moderate exercise freedom from worry are other essentials requisite for a life free from unnecessary illness and disease.

—Health Bulletin, Toronto.

AN TH R A X

Much interest has been attracted in the City recently by the discovery of three cases of anthrax within a period of thirty days. These cases constitute the first reported cases of this disease in the City of Milwaukee, which, while not unknown, is rare in this country. Common names for anthrax are "wool sorters' disease" and "malignant pustule."

This disease is seen principally among individuals whose occupation requires them to handle hides of animals or to work in the sorting of wool. The infection, which consists usually of a sore which has somewhat the appearance of a boil or carbuncle, is acquired by the entrance into the skin of a bacillus or germ through an abrasion or wound. The hides of animals may contain upon them these germs and when these hides are handled by tannery workers, if there is a wound upon the skin, the germ makes entrance through this opening.

Dry hides brought into this country from foreign lands not infrequently are contaminated with the anthrax germ and the dust and hair detached from these hides and floating in the air of the hide rooms or

beam rooms of tanneries or in railroad cars may contain these germs and infect those who handle them.

Sheep, mice, guinea pigs, rabbits and cattle are particularly susceptible to this disease. Horses, pigs and carnivorous animals are scarcely at all susceptible and fowls are naturally immune to this infection.

In from eight to fifteen hours following the inoculation, a small oedematous puffiness appears about the site of inoculation, the glands (or kernels) in the neighborhood become swollen and the temperature rises one or two degrees. Later the individual becomes restless and the respiration is accelerated and then the individual becomes drowsy. If the patient recovers he is immune to further attacks.

The treatment of the disease consists primarily in the complete excision of the local sore and by the administration of a serum which has some curative value. The germs themselves are easily destroyed, but the spores of the germs are very resistant and animals dead of anthrax should be destroyed by burning, not by burying, as the life of the spores may endure for many years.

HAD TO OBEY ORDERS.

An old colored uncle was found by the preacher prowling in his barn-late one night.

"Uncle Calhoun," said the preacher sternly, "it can't be good for your rheumatism to be prowling round here in the rain and cold."

"Doctor's orders, sah," the old man answered.

"Doctors orders?" said the preacher. "Did he tell you to go prowling round all night?"

"No, sah, not exactly, sah," said Uncle Cal; "but he done ordered me chicken broth."

HORSE MEAT AS FOOD.

People in the old world have been accustomed to slaughtering and eating their equine friends for many years, but it is a new thing for us.

Between the 1st of August and the 15th of November, 51,000 pounds of horse meat have been inspected and passed in Milwaukee. 116 horses have been examined, 76 tagged and given the Ophthalmic Malline test for Glanders and 40 rejected as unfit for food.

The method employed in killing horses is identical with that used in slaughtering cattle. After being skinned the carcass is cut into quarters, the hind quarters yielding porterhouse steak, similar in appearance to venison, but somewhat darker in appearance and sweeter in taste than beef. The price of the meat ranges from six to twelve cents a pound.

Horse meat contains from two to four times more glycogen than beef. Glycogen is a very nourishing element, but unfortunately much of it disappears during the ripening of the meat. The forequarters of the animals are sent to the Washington Park Zoo and to the Zoo at Madison. The animals, at the Zoo, evidently relish their new food judging by the gusto with which it is devoured.

All horses to be slaughtered are first conducted to a central market. There they are given a rigid ante mortem inspection. Those to be used for food must be absolutely free from any contagious or infectious disease, or any septic conditions. Horses that have Spavins,

Ringbone or abnormal feet may be used with safety for food.

Horses that are extremely emaciated or afflicted with some condition that renders them unfit for food are rejected and the owners advised to destroy the animals.

All horses that are not rejected are tagged and presently given the Ophthalmic Malline test for glanders. Horses that react to this test, even in the slightest degree, are next subjected to the subcutaneous Malline test. If there are any reactors to this test the state veterinarian must be informed.

The first horse meat market in the city was opened. The owner has no trouble in disposing of hides to the tanneries. He is not permitted to sell any other kind of meat in addition to the horse meat. Hearts and livers are sold and there is a lively market for horse meat sausage of various kinds.

Restaurants in which horse meat is served are obliged to display a sign in a conspicuous place, letters six inches high informing patrons that horse meat is included in the menus.

From the present outlook there will be a steady growth in the horse meat market. With continually advancing prices and the most ordinary kinds of food soaring beyond the average reach, the faithful old horse, done with his lifetime job of serving on the cobble stones roads, ends his sphere of service by being put to a final and profitable use.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

September-October, 1917.

Annual Death Rate per 1000.....	10.11	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	2.6	Population (Est.) 1917.....	440,000
Annual Death Rate, Males.....	5.5	Annual Death Rate, Females.....	4.6
Annual Birth Rate, Males.....	13.9	Annual Birth Rate, Females.....	12.1
Death Rate less, Violence.....	9.2	Birth Rate less, Still Born.....	25.1
Deaths recorded	742	Births recorded	1910
Marriages	765		

BIRTHS.

SEX.	COLOR.	BIRTHS.	BY WARDS.
Males.....1020	White.....1904	First	78
Females.....890	Colored.....6	Second	76
REPORTED BY		Third	70
Physicians	1362	Fourth	53
Midwives	524	Fifth	56
Others	24	Sixth	70
NATIVITY OF PARENTS		Seventh	58
	Father Mother	Eighth	94
Milwaukee	218 299	Ninth	77
Wisconsin	558 675	Tenth	53
United States	226 218	Eleventh	81
Germany	214 148	Twelfth	93
Poland	165 119	Thirteenth	81
Austria	96 92	Fourteenth	119
Bohemia	4 4	Fifteenth	23
Sweden	18 3	Sixteenth	38
Italy	93 83	Seventeenth	73
Roumania	2 1	Eighteenth	43
England	18 11	Nineteenth	41
Holland	2 1	Twentieth	81
Norway	2 1	Twenty-first	70
Slavonia	5 8	Twenty-second	71
Hungary	7 7	Twenty-third	54
Russia	86 83	Twenty-fourth	77
Canada	137 115	Twenty-fifth	52
Greece	7 8	Hospitals	228
Unknown	17 12	Pair of twins	16
Ocean	25 —	Triplets	3
Elsewhere	25 23	Illegitimate	40
		Still born	67

NATIVITY OF PARENTS

	Father	Mother
Milwaukee	218	299
Wisconsin	558	675
United States	226	218
Germany	214	148
Poland	165	119
Austria	96	92
Bohemia	4	4
Sweden	18	3
Italy	93	83
Roumania	2	1
England	18	11
Holland	2	1
Norway	5	8
Slavonia	7	7
Hungary	86	83
Russia	137	115
Canada	7	8
Greece	17	12
Unknown	25	—
Ocean	—	—
Elsewhere	25	23

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	70	59	White	762	762
Youngest	18	15	Colored	3	2
Widowed	62	58	Others	—	—
Divorced	17	37			

NATIVITY.

	Groom	Bride		Groom	Bride
Milwaukee	21	26	England	8	4
Wisconsin	422	502	Holland	2	—
United States	95	68	Norway	7	3
Germany	48	44	Slavonia	—	—
Poland	30	18	Hungary	19	19
Austria	33	28	Russia	38	26
Bohemia	—	1	Canada	5	2
Sweden	—	—	Greece	12	9
Italy	14	8	Elsewhere	3	5
Roumania	2	2	Total	765	765

AGE.

	Groom	Bride
Under age	54	30
Under 25	252	451
25 to 35	345	211
35 to 45	86	53
45 to 55	20	18
55 to 65	6	2
65 to 75	2	1
Over 75	—	—

RESIDENCE.

	Groom	Bride
Outside State	69	35
Outside City	64	24
Married outside State.....	24	21

CEREMONY.

By Judges	63
By Justices	35
By Ministers	667

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.
Total Deaths.....	395	470	534	527	635	571	479	451	425	336	358	*384
Annual Death Rate.....	11.02	13.12	14.56	14.37	17.31	15.67	13.06	12.3	11.58	9.1	9.76	10.47
Cases and Deaths.....	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Typhoid Fever.....	5	2	10	9	13	4	10	8	2	1	4	7
Measles.....	22	0	26	32	135	10	234	4	174	1	36	38
Scarlet Fever.....	169	2	248	433	744	10	398	11	102	4	70	153
Whooping Cough.....	71	1	85	54	167	10	233	7	145	3	98	38
Diphtheria.....	128	9	82	67	53	10	50	5	55	7	65	98
Influenza.....	2	2	1	7	1	1	1	0	0	0	0	0
Small-pox.....	0	0	0	0	4	0	17	0	7	0	0	0
Poliomyelitis.....	1	0	1	0	0	0	1	1	0	0	0	1
Tuberculosis Pulm.....	72	22	55	52	98	30	90	28	90	41	85	75
Cancer.....	33	38	27	27	38	25	29	25	21	25	21	40
Meningitis.....	4	4	5	5	6	9	12	10	5	5	2	6
Apoplexy.....	24	22	20	24	27	28	28	25	25	25	21	10
Org. Heart Disease.....	34	42	44	32	48	46	35	35	40	40	24	31
Bronchitis.....	35	16	15	27	16	13	7	7	4	4	7	31
Pneumonia.....	33	78	117	125	147	116	72	39	25	12	26	37
Diarrhoea—Under 2.....	14	17	14	16	20	21	20	19	6	19	35	20
Nephritis.....	27	32	34	25	35	37	37	26	35	27	20	17
Congenital Debility.....	35	31	28	26	21	31	24	23	36	22	20	21
Senility.....	9	5	16	15	16	5	6	9	7	4	3	7
Violence.....	28	25	28	26	26	35	19	38	43	52	34	31
Suicide.....	9	4	7	6	6	8	4	5	4	13	9	6
Homicide.....	9	1	3	3	0	3	2	2	2	1	3	1
Under 30 days.....	51	52	51	55	57	53	33	39	50	35	30	31
Between 30 days & 1 year.....	31	29	32	38	33	47	24	24	17	32	30	39
1 to 5 years.....	18	35	52	34	57	69	53	30	27	26	50	39
5 to 60 years.....	169	212	223	205	213	248	203	213	191	153	166	164
Over 60 years.....	126	132	173	165	197	151	136	122	140	89	91	124
Age at Death, all ages.....	40.6	38.1	41.2	35.8	37.6	35.5	36.5	36.8	39.2	34.5	34.9	45.6
Age at Death over 5 yrs.....	52.8	51.8	55.5	53.6	54.7	50.5	50.3	48.	51.2	46.5	50.6	59.7
Public Institutions.....	106	107	108	123	95	135	109	114	102	89	75	101

* Rabies 1 death. Anthrax 1 death.

HEALTH-GRAMS

A TIP FOR YOU.

He spent his health to get his wealth,
And then with might and main,
He turned around and spent his wealth,
To get it back again. —

—*Buffalo Sanitary Bulletin.*

To prevent a “breakdown” be examined twice a year by your family physician. —

“BITE THE BUBBLE.”

Every person using a bubbling drinking fountain should remember that the object of this sanitary device is to prevent the interchange of mouth secretions. When mucuous and other matter from the mouth becomes attached to the nozzle it sometimes requires considerable force to remove it, and this is not always accomplished by a slowly moving current of water. In using a bubbling fountain the rule should be, “Bite the Bubble.” The lips should not touch any part of the fountain.

MILWAUKEE HEALTH DEPT.

CITY HALL — MAIN 3715

WHAT IS FOOD CONSERVATION?

"Don't ask us to save; let the wealthy do it! — We're saving all we can now."

Persons who meet requests of the government to conserve on food stuffs with this answer don't know what conservation means. Conservation has nothing to do with starvation. It does not require that anyone eat less food.

Conservation, as the national food administration has defined it, demands that we eat less only of wheat, meats, fats and sugar. These are world foods, and the world being at war, we must eat less of them if we are to have enough to go around.

But we can eat enough more of substitute foods, or fruits and vegetables, which must be eaten at home or rot, to make up for the smaller amounts of wheat, meats, fruits and sugars we use. Of course we must not eat more than we need and we must not waste. We must make every bit of food, whatever it is, go as far as it will. But this is not asking us to starve ourselves.

Some can save more than others, because some use more. The wealthy

and well-to-do can save the most by eliminating waste from the table and by reducing their scale of living to a more simple standard. Yet the poor can save, too, those foods which from their nature must be consumed at home.

Studies show that many poor families spend half of all they spend for food to buy meat. If they spent less for meat and more for cereals, rice, vegetables, fruits, etc., they would help themselves by getting more nourishment at less cost, and at the same time would assist the government to conserve.

All can save by eating only three meals a day. Stop the practice of serving luncheons and late dinners to guests and others, for the duration of the war. Eliminate the banquets, the "big feeds," in your clubs and lodges. In a word, eat to live; don't live to eat.

This is what food conservation means.

OSMORE R. SMITH,
*Secretary Food Board,
Milwaukee County Council
of Defense.*

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Bulletin

of the Milwaukee

FEB 6 1918

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

JANUARY, 1918.

Vol. 8, No. 1.

*HUMAN health and human efficiency
are the two most precious things on
earth. If out of this awful labor of
war a strong health sentiment for the
entire nation can be born then will our
sacrifices not have been in vain.*

*RUPERT BLUE,
Surgeon General, U. S. Public Health Service.*

Bulletin of the Health Dept., January, 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS JEANETTE HAYS,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.
Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

South View Hospital.

City's Hospital for Contagious Diseases.

Location: 18th Avenue & Mitchell Street.

Telephone: Orchard 60.

Visiting Hours: Tuesdays, Thursdays and Sundays from 2:30 to 4 P. M.

Route to Hospital: 8th—Viaduct car to Mitchell Street, walk three blocks west; or, Third—Burnham car to 18th Avenue, walk about three blocks south.

This institution is intended for the care and treatment of cases of con-

tagious diseases other than tuberculosis, and has now a capacity of 150 beds.

The patient will be cared for by the Health Department; specific request is needed if the family physician should remain in attendance upon the case. Such request should be made at the time of admission of the patient to avoid conflict in caring for the patient.

Requests for admitting patients should be made to the Contagious Disease Division or the hospital.

The ambulance cannot undertake to transfer patients to the hospital later than 4 o'clock.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

JANUARY 1918

THE WATER PROBLEM.

By GEORGE C. RUHLAND, M. D.

With the advent of cold weather the odor and taste of chlorine, which is used in treating the city's water supply to make it safe, has again become very noticeable and has again brought the usual complaints against the practice.

No one will deny that the taste and odor imparted to the water through the use of chlorine is disagreeable. It is, and there can be no argument about it.

However, before the Health Department, under whose supervision chlorination is carried out, is condemned, it seems only fair that the facts concerning the practice be examined fully and without prejudice.

Milwaukee gets its water supply from Lake Michigan. Into this same lake goes the city's sewage. Year after year an increasing amount of sewage pours into the lake until at present the water supply has been contaminated to a degree where it represents more or less dilute sewage.

Sewage contains many disease producing germs, notably those causing typhoid fever. It is dangerous, therefore, to drink sewage contaminated water. The United States government through its public health service investigated Milwaukee's water supply and pronounced it highly dangerous because of this sewage contamination.

Chlorine is being used as the only immediately available means for destroying harmful bacteria in the water and making it safe. Chlorine, as used by the Health Department, is not dangerous or harmful to health. Chlorine has been and is now used in New York City, Chicago, Philadelphia, and many other large cities of this country, in the treatment of their water supply. Some of these cities are using much larger quantities of chlorine than are or ever have been used in Milwaukee.

The government report referred to above expressly urges that chlorine be used and that it be used in quantities so "that free chlorine is present in the water."

It is regrettable, of course, that it should be necessary to treat the drinking water with chlorine. However, if any one is to be blamed for the situation, this blame must be placed upon the public. For more than twenty-five years the public was warned that it could not practice drinking sewage and not suffer harm from it. The warnings were not heeded.

Fortunately there is relief in sight. With the completion of the new intake, which, we are informed will be ready by next fall, the sewage disposal system and, we hope, a filtration plant, Milwaukee will have a water supply that will be safe, palatable, and abundant for all times.

Until then we must be patient and make the best of a bad situation.

WINTER COLDS.

By L. M. WARFIELD, M. D.

There is no acute disease so prevalent in winter as pneumonia. No one can say that he is so well that he will not be liable to contract pneumonia, so that it behooves everyone to pay attention to his health and to keep himself as fit as possible.

Pneumonia is a germ disease. The microscopic bacteria live in the throats of over half the population but may never set up any trouble. Germs so poisonous, that when injected into a small mouse produce death of the mouse in twenty-four hours, are found living quietly in the throats of some persons. These germs may never give their host any trouble for he may be partially immune to their action. But should he cough in the face of some other person he may scatter some of his very poisonous germs, inoculate his friend or some stranger and set up a violent cold which may settle on the lungs. Or the fellow who gets the shower of germs in his face may develop pneumonia, be unable to throw off the disease and he may die.

Winter colds are due to several kinds of germs. We do not know always just what germ is the real cause but we have considerable evidence that the pneumonia germ causes many of the colds which are transmitted from person to person.

Whenever one coughs violently there is forcibly expelled a shower of minute droplets which contain

the germs causing the cold. The handkerchiefs, clothing, hands, all are smeared with the germs, which are invisible to the naked eye. The lips also are covered. Since this is the case it can be readily seen that the utmost care should be taken to protect the other fellow. A person who has a winter cold and cough, who sits at home or in a room or street car coughing towards people without holding something in front of his mouth, is a dangerous person. He might as well take a pistol and fire it off indiscriminately. He might miss some people, wound some, or kill others. So the cougher might not give his cough, he might make some one ill, or he might give someone pneumonia with death as the end.

Winter colds, then, are "catching." They are not such simple affairs. They might prove most dangerous. The increased number of people who die of pneumonia during the winter months is eloquent evidence of the seriousness of the winter cold.

Now pneumonia may not start as a cold. A person may get chilled, his resistance thus be lowered, and the germs in his throat which usually are harmless become suddenly harmful and he is taken with a violent chill, fever and pain on one side. Pneumonia has set in.

Another thing to remember is that pneumonia being a germ disease at-

tacking the lungs and being accompanied with cough and sputum, it can be given by one person to another person. In other words, it is infectious. We have known that for some time, but the average person does not appreciate that fact.

Pay attention, then, to your winter cold. Remember it is infectious. Don't give it to others by carelessness on your part. And above all don't let it run on for weeks because it may be that this cold is the beginning of tuberculosis of the lungs.

FOOD VALUE OF ORANGES.

Until comparatively recent years fruits have been almost universally regarded as articles of luxury rather than as staple foods which enter into the scheme of nutrition and are essential for the complete and efficient dietary.

To one who has never given the matter special thought and attention, it is a surprise to discover how universal is the craving for fruits. Even the carnivorous Eskimos, who of necessity subsist chiefly upon animal foods, do not neglect to improve the opportunity afforded by their short summer season to gather and feast upon cranberries and other small juicy fruits which manage to survive the bleakness of the Polar region.

Stores of these fruits are laid up for winter use and are a precious resource for a protection against scurvy and other ills which are likely to result from the almost purely carnivorous diet upon which Eskimos are compelled to subsist during a considerable portion of the winter months.

Those who live in a more favored climate find in the orange and other citrous fruits an abundant supply of this most delicate and wholesome of

all food acids. The lemon contains seven per cent, sometimes more, of citric acid while the orange contains approximately one half of one per cent. This acid in sweet oranges, though present, is disguised by sugar, which is found in proportion of nearly eleven per cent.

The sugar of the orange, like its acid, has the advantage that it is prepared for immediate assimilation and requires no digestion.

It is to the sugar which it contains that the orange owes its chief value as a source of nutriment—a value which will be best appreciated by comparison with other similar food-stuffs. A pint of buttermilk, for example, has a food value one-fourth less than orange juice.

This statement will certainly be a surprise to many readers but may be verified by anyone desiring to look the matter up (Bulletin No. 28 United States Department of Agriculture.)

Thus, while the orange is always a grateful addition to any ordinary bill of fare, it also has nourishment qualities to highly commend it.

The great value of the orange as a food adapted to certain grave conditions of disease is little apprec-

iated by the public and far less often utilized by medical men than the merits of this truly marvelous fruit deserve.

Here are a few of its medical uses:

As a food in fever cases, nothing could be more perfectly suited to requirements of the patient's condition. The fever patient needs water to carry off poisons which are burning him up and against which his cells and organs are struggling.

Orange juice supplies the finest sort of pure, distilled water, absolutely free from germs or foreign matters of any sort. The grateful acids furnish aid in satisfying thirst, and the agreeable flavor makes it possible for the patient to swallow the amount needed.

Another class of cases in which orange juice is almost indispensable is found in those most unfortunate and suffering of mortals—the bottle-fed babies.

A few years ago, the fortunate discovery was made that orange juice contains elements needed to supplement the bottle-fed baby's dietary.

Every infant fed upon sterilized milk or artificial infant foods; in fact, every infant fed from a nursing bottle and older children who are not doing well should receive daily not less than four ounces of orange juice.

The acid of orange juice and the sugars it contains aid digestion by stimulating the gastric glands to increased activity. It is also an appetizer of the first quality.

A glassful of orange juice before breakfast has a decided laxative effect with many persons. Sometimes it is advantageous to take a glassful of orange juice at bedtime as well as in the morning.

On the whole, oranges are probably capable of serving more useful purposes in the economy of the body than any other fruit. As people become better educated in dietetics, oranges will be more and more appreciated and more freely used. They are one of the most perfect and most useful of all fruits.

—Taken from "GOOD HEALTH."

CHEERFULNESS.

Cheerfulness makes life worth living—work worth while—makes you a joy to your friends, and an influence for the better to all with whom you come in contact. Cultivate cheerfulness. Be a builder. Dispense sunshine—it makes things grow. It indicates a healthy mind and a healthy body. All of us have difficulties.

They are divided into two classes—real and imaginary. Face them cheerfully, you are bound to win. The imaginary ones fade away—the real ones are surmounted. When you teach school or work in a store or in an office, remember it is not a crime to smile or be cheery over your work.—*Exchange*.

EATING AND TALKING.

By JAMES PETER WARBASSE, M. D.

We are becoming convinced that thorough mastication is highly desirable. Confirmed dyspeptics are curing themselves of their ailments by giving more attention to the chewing of their food. In fact, of late, this particular physiological function has received much serious attention, to the great advantage of all—to say nothing of the dentists. But as we contemplate this new masticatory era, we hark back and encounter the long-accepted and time honored dictum, which has never been disputed, that good company and conversation aid digestion. It seems that this ancient decision, born of the round table, the ale-house, and the “merrie companie,” must be reversed in the court of the new gastronomy. When one is engaged with a mouthful of food, he should be unmolested until it is resolved into solution.

Mastication, as a physiological function, has been too much disturbed by the ancient dictum above referred to. Here is the eater conveying a loaded fork of nourishment to his mouth; at the same moment his table companion propounds a question or utters a statement which demands a response. Witness the gulping down and the responsive utterings. This is no unusual scene. Of course there is no objection to talking in the intervals of mastication, but this is practically impossible in the atmosphere of so-

called table good-fellowship. It is hardly to be expected that your company shall time the working of his mind and conversation to the working, so to speak, of your jaw. That is an utopian dream. It would be straining antiphonal possibilities. The invitation “Let’s go to the Waldorf and hear the newly rich eat!” bears witness to these contentions. Talking and eating mean often munching and gulping, but not mastication.

The company of those who understand us, the company of healthy children, and the company of those who do not demand entertainment from us, are surely not undesirable at mealtime; but society which is pestiferous and which demands talk is subversive to the best interests of the table. The old dining-hall legend, that conversation aids digestion, is presumably false. The notion that a lull at the table means that the dinner is not a success at that moment, will not bear the scrutiny of modern physiology any more than it will when two or more, gathered together, are engaged in any other physiological function. The most important thing should have precedence. An ideal conversation at the table would be simple voluntary contributions of pleasant thought which excite no immediate reply from anyone engaged in eating. To ask a chewing guest a question is as rude as to jostle his elbow. An ap-

propriate and modern dining-room motto would be, "Let the full mouth be undisturbed."

"It is not well for man to eat alone" is true only provided his society is agreeable, intelligent, and familiar with the physiological pro-

prieties. Otherwise he will do better to conduct himself like the lion, and, while he gnaws his bone, devote himself to that function exclusively. When we eat, let us eat as simple men that are nourished by their food.

Room Temperature and Moisture.

Do you know that the air of the average steam, hot water, or furnace heated room is drier than that of the driest desert?

Do you know that this excessively dry, hot air not only ruins the binding of books, loosens and makes creaky the joints of furniture, but, worse than that, attacks also the health of those who live in such atmosphere?

Hot, dry air will take moisture wherever it can find it, whether that be the moisture in the wood of furniture, in plants, or in the tissues of the body.

Nature intends that the air we breathe shall contain moisture. The nose, therefore, is lined by membranes that give off moisture. There is, however, a limit to the capacity of these delicate membranes to supply the necessary moisture, and the continuously living in dry superheated atmosphere is ruinous to this function of the nose.

Many a "cold in the head" with swollen mucous membrane of the nose, and difficult breathing, with headaches, irritability, and general discomfort, is due entirely to the absence of moisture in the room atmosphere.

Try placing an open dish filled with water on the radiator, or over the register, and see how much moisture will be taken up by the hot dry room atmosphere. Note also how much better you will feel, and last but not least, observe that it will require a less high room temperature and consequently less coal to keep yourself comfortable. In view of the difficulty in getting fuel, the latter point is of importance in itself.

Engineers estimate that about 25% of heating is expended in raising the temperature from 60 to 70 degrees; so if we can keep comfortable at a temperature of 65 degrees we shall have saved at least 12½% of the total cost of heating.

Public health is public wealth.—Franklin.

* * *

Healthy, strong men seek education and make opportunity.—Jordan.

FIRST AID TO THE INJURED.

ABOUT FROST-BITES AND CHILLBLAINS. By L. SCHILLER, M. D.

Failure to protect the body by means of sufficiently warm clothing or too prolonged exposure to cold causes freezing of the exposed parts of the body. The parts most commonly affected are the ears, nose, cheeks, hands and feet. These parts are not only most commonly exposed, but also farthest away from the center of the circulation. Frost bites are more apt to occur in individuals whose health is impaired and whose circulation is sluggish. The face and hands of such persons often become bluish or livid from exposure to even slightly cold weather. When a part has been severely frozen it becomes white and without sensation. To restore its vitality with the least damage, friction with snow, if it can be obtained, or application of very cold water gradually warmed, are the best means at hand. It is well not to enter a warm room and remain near a stove until the circulation has been well established. Blisters with ulcers and more or less destruction of tissue may result, in spite of the best efforts, if the freezing has been sufficiently prolonged and extensive. These conditions must be treated by a competent physician.

CHILLBLAINS are the result of frost-bites and are mostly found on the balls and heels of the feet. They manifest themselves by a bluish swelling, which itches and burns, especially when warm. They are best treated by immersion in alternating cold and hot water and vigorous friction. The purpose of this procedure is to improve the circulation in the parts. More radical local medical treatment should be entrusted to a physician.

A warning to keep the feet, ears and face well protected to avoid these conditions is quite timely.

CHAPPED HANDS occur during the winter months as a result of an unusual dryness of the skin. This is due to a diminution of the natural secretion of oil. The skin is more susceptible to the effects of air and water, and these agents induce the condition of chapped hands. The remedy suggests itself, and consists in frequent inunctions of the hands after washing and well drying, with lotions containing oily substances or glycerine. A large number of hand lotions are to be obtained in the market for this purpose.

IT PAYS TO SMILE.

Anger uses up the vital forces at a very rapid rate. After having been thoroughly angry one is usually ex-

hausted. That is one reason why a smile is better for your health than a scowl.

Making The Sick Child's Bed.

To accomplish this, particularly so that the little patient will not be disturbed, is something that concerns every mother, more especially with reference to summer ills. It can be done. Health Department nurses offer these suggestions:

First remove the bedspread. Place a fresh, clean sheet on top of the blankets. Slip the blankets and soiled top sheet from beneath the fresh sheet. Replace the blankets and counterpane on top of the clean top sheet. The patient is now gently rolled down and pillows removed.

Now roll the under sheet lengthwise, until the roll is against the patient's back. A clean sheet, one-half of which is rolled lengthwise, is tucked in on one side and spread

over the exposed half of the mattress. The patient is now gently rolled over on the clean side of the bed, the soiled undersheet removed and the clean one unrolled and tucked in on the other side, after which the blankets are replaced. Often, in surgical cases, it is best to roll the sheet from the top, the roll passing under the shoulders, waist, hips and legs.

A draw-sheet is useful, as it prevents the need of the undersheet being changed so frequently. It is simply an extra folded sheet drawn and pinned tightly across the bed reaching from shoulders to knees. A rubber draw-sheet for protection of the mattress is necessary when very young children are ill.

Gasoline As An Emergency Medicine.

Gasoline is a good disinfectant for the treatment of wounds in emergency cases. In fact, gasoline is such an effective disinfectant that Dr. Dorothy Childs, in her lectures to classes in hygiene in the University of Kansas, strongly urges that an eight-ounce bottle of gasoline be kept in the family medicine closet for use in treating cuts and scratches. The

value of gasoline in cleansing wounds has been demonstrated on the European battlefields, and it is especially good if the wound is lacerated or if the skin was dirty when the wound was made. After washing the wound with gasoline, paint with a tincture of iodine, suggests Dr. Childs. Use a small wad of absorbent cotton for the iodine "paint brush."

Get out of the "food rut"—try the simple foods; you'll like them!

ORDINANCES YOU SHOULD KNOW

INFECTIOUS DISEASES; REPORTS IN ALL MUNICIPALITIES BY PHYSICIANS AND OTHERS

Section 1416-1 (Laws of 1907). It shall be the duty of every physician to report to the department of health in every town, incorporated village or city, in writing, within 24 hours, the full name, age and address of every person suffering from any of the infectious or contagious diseases following, to-wit: Measles, smallpox, diphtheria (membranous croup), scarlet fever (scarletina), typhoid fever, tuberculosis (of any organ), rubella (rotheln), chickenpox, typhus fever, plague, erysipelas, Asiatic cholera, whooping cough, cerebro-spinal meningitis, yellow fever; and it shall be the duty of every person, owner, agent, manager, principal or superintendent of any public or private institution or dispensary, hotel, boarding or lodging

house, in any such town, incorporated village or city, to make a report, in like manner and form, of any inmate, occupant or boarder suffering from any of the said infectious or contagious diseases.

PENALTIES:

Section 1416-12. Any person who shall violate any of the provisions of this act, and any person who, without written authority from the commissioner of health or health officer shall remove, or cause to be removed any placard placed upon premises or apartments which are or have been occupied by persons sick with any of the diseases mentioned in Section 1416-1, upon conviction thereof, shall be fined not less than \$5.00 nor more than \$100 or by imprisonment in the county jail for not less than five days nor more than ninety days.

ARE YOU DOING YOUR DUTY?

The unreported case of contagious disease is like a smoldering fire. Unless the fire is promptly put out it may grow and develop into a conflagration that may wipe out the entire city.

So an unreported case of contagious disease may spread until it becomes an epidemic.

Unless the fire is promptly reported, the Fire Department cannot save your house. Unless contagious disease is promptly reported, the

Health Department cannot protect you.

The presence of contagious disease in a community means that some one has failed to do his duty.

Are you doing your duty towards the community in this respect?

ISN'T IT?

Isn't it strange that some people have to be pounded on the back everlastingly, to do those things that are for their own good?

LAUGH WITH US

TO LAUGH IS HEALTHFUL;

It Aids Digestion And Drives Dull Care Away.

CONSERVATION

McPhee lived in a shanty near a main highway. The foundations were lower than the road, through which ran a big water main. The place was raised on posts, leaving a large cellar underneath, where McPhee kept a dozen hens.

One day the water main burst and drowned the hens. Thereupon McPhee entered a claim against the city.

"I've got me money!" shouted the old man to his next-door neighbor later.

"Glad to hear that," was the reply, "and how much was it, McPhee?"

"Thirty dollars."

"And phwat are ye goin' to do with the money?"

"I'm goin' to buy thirty dollars' worth of ducks," said McPhee.

MORE EFFECTIVE

One day a woman came to General Booth and complained of the bad conduct of her husband. General Booth listened patiently to her tale of woe, and when she had finished, asked her solemnly, "Have you ever tried heapin' coals of fire upon his head?"

"No," replied the injured wife, "but I've tried 'ot water!"

TOO LATE

This from a local physician: Little Dorothy was finishing her prayers. "Dod bless muvver, Dod bless favver, Dod bless dramuvver. Amen."

"But, dear," said grandmother, "you forgot your new little sister that came today."

"Too late," replied Dorothy. "Tan't det her in now."

SOME EDUCATION!

This story is told by a Milwaukee banker, apropos of the war-time tendency to talk in terms of billions: Two tramps, sitting by the roadside were indulging in an imaginary game of poker with pebbles. One of them was a downfallen college graduate; the other just an ordinary tramp.

Said the latter, "I'll just bet you a thousand dollars as an opener."

The college graduate replied, "I raise you a million."

"Make it a billion," said Pat.

"Raise you a hundred billion."

"Two hundred billion," said Pat.

"Seventeen quadrillion."

Pat scratched his head for a minute. Then he said, "Take the pot, you educated son of a gun!"

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

December, 1917.

Annual Death Rate per 1000.....	10.52	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	29.1	Population (Est.) 1917.....	440,000
Annual Birth Rate, Males.....	5.8	Annual Death Rate, Females.....	4.7
Annual Birth Rate, Males.....	15.	Annual Birth Rate, Females.....	14.1
Death Rate less, Violence.....	9.7	Birth Rate less, Still Born.....	28.1
Deaths recorded	386	Births recorded	1067
Marriages	318		

BIRTHS.

SEX.		COLOR.	BY WARDS.		
Males.....	551	White.....	1067	First	38
Females.....	516	Colored.....	—	Second	18
REPORTED BY				Third	39
Physicians			823	Fourth	12
Midwives			237	Fifth	32
Others			7	Sixth	35

NATIVITY OF PARENTS.

	Father	Mother
Milwaukee	127	177
Wisconsin	317	368
United States	138	126
Germany	97	75
Poland	70	61
Austria	58	55
Bohemia	3	3
Sweden	1	—
Italy	38	38
Roumania	4	—
England	11	7
Holland	5	1
Norway	7	6
Slavonia	2	2
Hungary	48	50
Russia	94	81
Canada	5	4
Greece	5	4
Unknown	22	—
Ocean	1	2
Elsewhere	14	7

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	71	72	White	316	317
Youngest	18	16	Colored	2	1
Widowed	26	19	Others	—	—
Divorced	14	18			

NATIVITY.

	Groom	Bride		Groom	Bride
Milwaukee	14	15	England	1	2
Wisconsin	164	206	Holland	1	—
United States	67	48	Norway	6	1
Germany	14	13	Slavonia	—	—
Poland	1	—	Hungary	5	5
Austria	10	5	Russia	19	13
Bohemia	—	—	Canada	1	2
Sweden	2	—	Greece	2	2
Italy	2	2	Elsewhere	9	3
Roumania	—	1	Total	318	318

AGE.

	Groom	Bride
Over age	22	7
Under 25	106	193
25 to 35	149	96
35 to 45	24	18
45 to 55	11	3
55 to 65	5	—
65 to 75	1	1
Over 75	—	—

RESIDENCE.

	Groom	Bride
Outside State	23	8
Outside City	51	30
Married outside State.....	11	11

CEREMONY.

By Judges	52
By Justices	22
By Ministers	244

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
Total Deaths.....	534	527	635	571	479	451	425	336	358	*384	395	386
Annual Death Rate.....	14.56	14.37	17.31	15.67	13.06	12.3	11.58	9.1	9.76	10.47	10.77	10.52
Cases and Deaths.....	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases
Typhoid Fever.....	4	1	9	4	10	4	3	4	2	7	1	4
Measles.....	44	32	44	13	0	337	1	36	10	38	0	118
Scarlet Fever.....	36	4	433	7	0	234	1	74	0	153	3	140
Whooping Cough.....	398	2	54	10	11	244	8	70	3	38	1	43
Diphtheria.....	116	15	67	5	5	175	9	98	2	98	10	55
Influenza.....	2	7	7	10	50	5	66	8	13	98	8	0
Small Pox.....	0	0	0	1	0	1	0	0	0	0	0	0
Poliomyelitis.....	0	0	0	0	17	0	0	0	0	0	0	0
Tuberculosis Pulm.....	75	28	52	30	90	28	32	25	38	75	27	53
Cancer.....	31	27	31	25	12	10	5	21	28	40	2	68
Meningitis.....	5	4	6	9	12	28	25	5	7	6	4	4
Apoplexy.....	20	24	27	28	10	25	25	21	14	10	23	18
Org. Heart Disease.....	44	32	48	46	35	53	40	22	24	31	30	24
Bronchitis.....	16	27	16	15	7	10	4	4	7	7	11	5
Pneumonia.....	117	125	147	116	72	39	25	12	26	37	32	47
Diarrhoea—Under 2.....	14	16	20	21	20	19	6	19	35	20	22	17
Nephritis.....	34	25	35	26	27	27	35	22	12	17	21	28
Congenital Debility.....	28	26	27	31	24	23	36	22	20	21	6	3
Senility.....	16	15	16	5	6	9	4	4	3	31	44	31
Violence.....	28	26	26	35	19	38	43	52	34	6	8	9
Suicide.....	7	6	6	8	3	5	4	13	9	6	1	17
Homicide.....	3	0	0	0	2	2	2	0	3	1	0	0
Under 30 days.....	51	55	57	53	33	39	50	36	30	31	32	48
Between 30 days & 1 year.....	52	68	83	69	54	47	17	32	50	39	43	35
1 to 5 years.....	35	34	57	50	53	30	27	26	31	26	18	18
5 to 60 years.....	223	205	213	248	203	213	191	153	156	164	190	174
Over 60 years.....	173	165	197	151	136	122	140	89	91	124	112	111
Age at Death, all ages.....	41.2	35.8	37.6	35.5	36.5	36.8	39.2	34.5	34.9	45.6	38.5	37.8
Age at Death over 5 yrs.....	55.5	53.6	54.7	50.5	50.3	48.1	51.2	46.5	50.6	59.7	50.5	51.2
Public Institutions.....	108	123	95	135	109	114	102	89	75	101	108	94

* Rabies 1 death. Anthrax 1 death.

What Do You Do About It

If every one of the country's 20,000,000 homes wastes on the average only one slice of bread a day, the country is throwing away daily over 875,000 pounds of flour or enough to make 365,000,000 loaves a year.

DO IT NOW!

"DO YOUR BIT!"

Eat Less and Plainer Food.

Practice Moderation in All
Things.

Do Unto Others as You Would
Have Others Do Unto You.

Be of HELP to Your Fellow-
men and let Your Life be of
Value to the Community in
which You Live.

MILWAUKEE HEALTH DEP'T.

CITY HALL — MAIN 3715

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

FEBRUARY, 1918.

Vol. 8, No. 2.

"The highest form of service which the medical profession can perform for mankind is prevention of disease."

—*Warbasse.*

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

FEBRUARY 1911

"PREVENTIVE MEDICINE."

BY GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

What does preventive medicine mean to you?

Do you think it some "elixir of life" directly from the fountain of youth, sold at so much per bottle?

If this has been your conception of preventive medicine, you must be prepared for disappointment, for preventive medicine is not purchasable that way.

Preventive medicine, in fact, has nothing to do with drugs. It is not in competition with "schools" of medicine, Scientists, osteopaths, chiropractors, sellers of patent medicines, quacks, or others, all of whom are zealous in the treatment of disease.

Preventive medicine is concerned only in the causes of disease and applying preventive measures.

Preventive medicine has as its object the reduction of disease by preventing the well from becoming sick.

Its aim is to learn all that can be learned about the laws of health and apply these to the end "that pain may be lessened, sickness prevented, physical efficiency promoted, and death postponed."

Preventive medicine believes that most ills are due to wrong living; preventive medicine tries to establish what is right living. There is much that has already been learned about right living. If what is known today

about right living were generally applied, the average life of the human race could be prolonged by fifteen years.

Preventive medicine deals in simple remedies. It believes in cleanliness of person and habits. It believes in purity and wholesomeness of food, of milk, of water. It believes that food should be taken in moderation and well masticated. It believes in fresh air and deep breathing. It believes in rational clothing, in proper housing. It believes in proper hours of labor, of rest, of play. It believes in moderation in all things.

Yet you who know that all this is rational and true and safe, how much do you do to inform yourself and live accordingly? You who are careful to overhaul boiler and engine, what time and care and attention are you giving to find out if the human machinery is in good running order?

Since the beginning of the great world war, approximately seven million have been killed in action on all sides; for that same period of time more than twenty-five million died in the various nations engaged in the war from diseases that might have been either entirely avoided or at least postponed by preventive medicine.

Think it over!

Bulletin of the Health Dept., February, 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

GEORGE E. ADAMS,
Vital Statistics.

E. T. LOBEDAN, M. D.,
Child Welfare.

F. T. THOMSON, M. D.,
Sanitation.

GEORGE R. ERNST, M. D.,
Tuberculosis.

H. H. BRYANT, D. V. S.,
Food Hygiene.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

MISS JEANETTE HAYS,
Public Health Nursing.

RUSSELL W. CUNLIFFE,
Chemistry.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

MEDICAL INSPECTION OF PAROCHIAL SCHOOLS.

Central Office—Fifth Floor, City Hall.

The Dental Clinic is located in room 417, Matthews Building.

The Health Department makes medical inspection of all parochial schools in the city. There are five physicians employed in this work. Five nurses are also employed, who visit the children in their schools and make visits at the homes. The medical inspectors give no treatment to children, but examine them to determine what defects exist and to advise the

parents concerning the correction of these defects. They also make physical examinations of children attending parochial schools.

The Dental Clinic is open each weekday from 9:00 a. m. to 5:00 p. m., with the exception of Saturday, when it is open from 9:00 to 12:00. Free dental attention is given to children whose parents are not able to provide needed attention. Parents who desire this attention for their children should make application at the office in the City Hall. The dentist will not receive patients at the clinic who do not have an appointment card made out from the Central Office.

VALUE OF HEALTH STATISTICS.

L. W. HUTCHCROFT, STATISTICIAN, STATE BOARD OF HEALTH.

Wisconsin sustains an economic loss each year of more than \$30,000,000 on account of cases of preventable illness and preventable deaths. This estimate does not take into account the misery and suffering incident to the death of the bread-winners. Preventable disease is one of the chief causes of poverty and should be entirely eliminated as a factor in producing this undesirable condition. If every case of typhoid fever could be properly taken care of, the disease would entirely disappear from our state in a few months. Diarrheal diseases which are so fatal to young children are easily avoided. Eradication of these diseases is dependent upon proper care and feeding of young children and a pure water and milk supply. If the first case of smallpox, scarlet fever, diphtheria and other dangerous communicable diseases in a locality is reported to the health officer promptly and the provisions of the law regarding the prevention and control of a disease are enforced, epidemics or serious outbreaks would be unknown in our state. It must be evident, therefore, to anyone that the health officer must know of the presence of the disease before proper quarantine or other preventive measures can be established.

There is no case of any reportable disease in a locality which is so important as the first case. Previous to our knowledge regarding the transmission of disease, preventable illness was largely a personal matter between the patient, the family and the physi-

cian. In cases where the fact but not the manner of the disease outbreak was known, local health officials could quarantine the patient and prevent others from coming into contact with him. Today preventable illness is no longer a matter which concerns the individual alone. All the conditions of life and of living enter into the causation and suppression of disease. Many of these factors are beyond control of the individual they can be controlled only by society acting in an orderly and effective manner.

No health officer can have a proper understanding of the health problems in his district without a complete record of all cases of dangerous communicable diseases as well as all birth and death records. The morbidity reports of communicable diseases constitute the health officer's health barometer. The reports of fatal cases of these diseases are not sufficient and should not be relied on entirely as an index of health conditions in any locality. Each local health officer, in order to render the most efficient service, must require that all cases of dangerous communicable diseases occurring in the district be reported to him promptly as the law requires. Unless the health officer knows of the existence of these cases he cannot effectively prevent a further spread of the disease. Any failure or neglect to report case of dangerous communicable disease to the health officer or any attempt to conceal the presence of these diseases should result in an immediate prose-

cution either under a local ordinance or under the provisions of Section 1416-12 of the statutes. Unless the health officer knows approximately at least the number of cases of tuberculosis, typhoid fever and other dangerous communicable diseases in his district during any year, he does not have a proper conception of the health

problems of his district and therefore cannot apply his organization effectively along any line. Accurate statistics both regarding cases of dangerous communicable diseases and the number of deaths resulting therefrom are indispensable in a modern efficient health organization.

The Future Fields of Medical Activity.

During the evolutionary progress of medicine, there will always be an important mission for the doctor. He will have less and less to do with the care of the sick and more and more with the prevention of sickness. When the relative proportion of doctors becomes less, the importance of the individual doctor should become greater. One physician as sanitary commissioner at the head of a community can prevent an epidemic of typhoid fever which would demand the activities of a thousand physicians once it is started. The physician, exercising the preventive function, is to be the important man, not only as the community adviser, but as the family and individual adviser as well. Common sense and the present tendency of scientific work declare that it is better to exercise endeavors to prevent disease than to cure it. It is cheaper to keep one man constantly on guard to prevent the spark from striking the tinder than to summon a thousand in the hour of distress to save the burning citadel.

And some day the wise man will attach the physician to his family, not to cure diseases but to prevent them. As a business matter it will be more economic. One of our greatest

social absurdities is permitting people to become sick and then employing a doctor to get them well. It is the largest of all of the preventable wastes. We are prodigal of nothing to so great a degree as we are of our health. That is our greatest national extravagance. In that we find the chief waste of natural resources.

Health is too important a thing to be made subject to the rules of trade and commerce. When the average man is taken sick he then employs a doctor to help him recover. The doctor is placed in the unfortunate position of depending upon the morbidity of others for his livelihood, and the patient is placed in the unfortunate position of having his misfortune become the doctor's advantage. This system works hardship to both parties. A better state of civilization will demand that the physician be regarded as a public necessity and that each community shall have competent medical men, with assured incomes, the same as health officers, paid by the public. The better the state of health the physicians can maintain in their districts, the greater should be their emolument—not the less, as it now is. Every person should have easy access to skillful and scientific

medical services, not as a matter of charity, but as a matter of right. The charlatan would not thrive under such conditions. A policeman is now

assigned to a certain district to prevent and correct violations of the law. Health should receive the same consideration as property does.

WARBASSE IN MEDICAL SOCIOLOGY.

The School Teacher As Health Guardian.

Seldom is a system of medical school inspection so elaborate that the services of the teacher are not essential to efficiency. Many teachers are overwhelmed by the idea of passing judgment as to whether a child should be sent home or not. A knowledge of medicine is not necessary. In fact, "a little knowledge is a dangerous thing," and the teacher should act on one plan only. She should aim to send home every child which shows any symptom of beginning infectious disease without attempting to make a diagnosis. Above all, the child with a running nose or a fever should be excluded. A clinical thermometer and

solutions for disinfecting it should be in every teacher's equipment. Sudden vomiting, headache or sore throat are reason enough for sending a child home and asking that the health officer or school physician investigate, or that the family physician be called. The school physician and the public health nurse, with their medical knowledge and training, are necessary for advising and backing up the teacher, but on the firing-line must be always the alert school teacher. On her we depend for the protection of our children. She can make the school safe.—(California State Board of Health.)

Statesmen's Views On Public Health.

Nearly three-quarters of a century ago, Lord Beaconsfield, talking in the British House of Commons, said, "Public health is the foundation on which rests the happiness of the people and the strength of the nation." He drew attention to the fact that though industries may flourish, agriculture increase in productiveness, arts flourish, architects cover the land with palaces and mansions, the whole nation give evidence of marked prosperity, yet, said Disraeli, "if the population becomes stationary, if they decrease in their

physical and mental fitness, that nation must fall. That," said Disraeli, "is why I say that the first duty of a statesman is the care of the public health."

Practically the same sentiment was expressed twenty-five years later in just a little different language by Gladstone, and has been reiterated by many of the statesmen throughout the civilized world. These men are recognizing now that the people and the physical and mental fitness of the people represent the most valuable asset of the nation or municipality.

HYGIENE OF THE FEET.

Do you suffer from aching feet?

This pain may be due to tenderness of the feet, improper shoes or hosiery, or broken arches.

Tenderness of the feet may be caused by callous spots, blisters, excessive perspiration, or ingrowing nails.

If you suffer from tender feet you should take a cold foot spray every morning and every evening.

Get the tonic effect of the full pressure of the cold water from the faucet upon the feet.

Dry the feet thoroughly with a Turkish towel, paying special attention to the spaces between the toes.

Rub the feet with alcohol and with boric acid, and powder them.

Callous spots on the feet should be rubbed with pumice stone, and softened with vaseline and cold cream. Do not cut them.

Excessive perspiration may be overcome by frequent bathing of the feet and frequent changing of hose. Avoid use of lotions.

Blisters caused by perspiration may be relieved by the application of spirit of camphor on a piece of cheese cloth.

Genuine blisters should be painted with collodion, to protect them from the air and the friction of the hose.

To cure an ingrowing nail, cut a V-shaped notch at the center of the top of the nail.

As the V closes in the course of the nail's growth, the nail will be drawn away from the ingrowing corners.

If the skin is badly inflamed, there is danger of blood poisoning and medical attention should be obtained.

Do you pay sufficient attention to your hose and your shoes?

Both should be changed daily.

Or, wear two pairs on alternate days, so that the same hose and the same shoes may not be worn on successive days.

Cold feet in winter are caused by defective circulation.

Persons suffering from cold feet will get relief from the daily cold spray.

They should also practice deep knee bending and heel raising, to stimulate the circulation in the legs and the feet.

They should wear warmth-giving and warmth-retaining hose of gauze weight, instead of sheer hose and low shoes.

If your shoes are too tight, you will get callous spots.

If your shoes are too loose, you will get blisters.

If your heels are too high or too low, your arches may suffer.

The proper height of your heels should be determined by the height of your instep and of your arch.

Do you stand and walk with your toes pointing outward?

This out-toeing position throws the weight of the body upon the weaker inner side of each foot, and tends to break down the arch of the foot.

Stand and walk with the feet a few inches apart and parallel to each other, the knees stiff and unbent, and the toes making a distinct grasping effort, to throw the weight of the body on the stronger outer edge of each foot.

If you follow these directions in walking and in standing, you will never suffer pain in the arches of your feet.

If you are obliged to stand much, you should guard against a weakening of your arches by systematic exercise.

The following symptoms of weak arches should be promptly heeded: A feeling of weakness on the inside of the foot or the ankle; a slight pain in the back of the leg between the knee and the ankle; a severe pain at the knee or at the hip; painful or sensitive heels or muscles.

To strengthen the arches, stand with the feet toeing inward slightly and the knees bent lightly forward and outward. This is a bow-legged position.

Practice this movement for a minute or two, from ten to twenty times a day, whenever a moment for relaxation presents itself.—(Copyright 1917 by Leonhard Felix Fuld, Ph.D.)

MILK AND DISEASE PREVENTION.

By GEORGE C. RUHLAND, M. D.

The importance of milk and butter fat as food elements, especially for children, has been frequently and widely discussed, both in this bulletin, as well as elsewhere.

The subject, however, has received new and important interest through the investigations of Prof. E. V. McCollum of John Hopkins University Medical School, who presented the results of his study in a paper before a recent meeting of the American Public Health Association at Washington.

Under the term of "cereal disease," Prof. McCollum, whose research has been along the line of food-deficiency diseases and the effect of heat on foods, describes a new disease for which milk and butter fat are the specific remedy.

Aside from general nutritional disturbances, the disease is characterized by inflamed eyes, perforation of the cornea, and blindness.

In an infants' institution where, through a mistake, a number of children were fed barley water only for four or five weeks, all of them developed "cereal disease."

During a period of food shortage in Japan, fifteen hundred children, who lived chiefly on a vegetable diet, developed the disease.

Similarly, in a poor district of Denmark, where the children are fed on mechanically skimmed milk, this same disease is found.

"Cereal disease" appears to be due to a lack of material found only in the butter fat of milk and other animal fat. It is not, however, found in vegetable oils or fats. Boiling or pasteurizing does not seem to affect this disease preventing property of the milk.

According to press dispatches, it appears that the slaughtering of cattle, the consequent loss in production of milk, and the difficulty of obtaining a supply of animal fat, is telling heavily on Germany and is resulting in disease due to mal-nutrition, and in high infant mortality.

In view of such evidence it would seem well that our efforts in economy, no matter what form they may otherwise take, should carefully avoid any reduction in the amount of milk or butter fat for children.

FIRST AID TO THE INJURED.

Epileptic Convulsion.—A person with an epileptic fit should be placed in a safe position on the ground or floor, with the clothes loosened and a pillow or cushion placed under the head; he should be left so until the fit is over. Something should be placed between the teeth, to prevent the tongue being bitten.

Convulsions in Children may be due to indigestion, pinworms, etc., or to brain-excitement in rickets or to irritation of the nerve centers in teething. A great number of the diseases of children are ushered in with convulsions, which take the place of the initial chill in the adult. They may come on suddenly or gradually.

The child should be put into a hot bath (at a temperature of from 100 degrees to 104 degrees F.), without waiting to undress it, which can be done in the water. The head should be kept raised and cold applied to it. The hot-water bath will dilate the blood-vessels of the body, thus diverting the blood from the brain to the body. If the attack is the beginning of any of the eruptive diseases, the heat will also bring out the rash, besides relieving any pain in the abdomen or elsewhere. The child is to be kept in the bath about five minutes, and is then taken out and wrapped in a warm blanket; an enema is given to clear the bowels. A physician should be summoned at once.

POISONING.

Precautions in the household use of poisons.—Accidental poisoning often arises from the administration of medicines from the wrong bottle. It is of great importance that all

bottles in the house containing liniments, washes, disinfectants, etc., that are likely to be poisonous when taken internally, should be kept in dark-glass bottles and prominently labeled, and, in addition, marked "for external use only," "poison," or some other warning inscription, so that no member of the household may use them internally by mistake.

The first treatment in all cases of poisoning, except those caused by very corrosive substances, such as strong acids and alkalis, is evacuation of the stomach-contents. This may be accomplished by emetics, the stomach-pump, or siphon-tube. Before the arrival of medical aid there may be administered a large tablespoon of mustard in a tumbler of warm water, or a solution of table-salt and warm water, not over one-half pint at a time, to avoid paralytic distention of the stomach-walls. These are very efficient household emetics, and may be assisted by tickling of the throat with either the finger or a feather. After vomiting, the patient should drink large amounts of milk or water, and the bowels should be emptied as soon as possible. Ordinarily, any vomited matter should be preserved for the physician's inspection.

If there are symptoms of collapse, such as weakness of pulse, feeble breathing, coldness of the body, insensibility, etc., the patient should be given stimulants, such as aromatic spirits of ammonia, strong hot coffee, strong hot beef-tea, brandy, or inhalations of smelling salts, ammonia, etc. He should be placed on his back, and be surrounded with hot-water bottles, and covered with blankets.

HEMORRHAGE.

BLEEDING FROM NOSE, LUNGS OR
STOMACH AND HOW TO
TREAT IT.

In hemorrhage of the lungs the blood is bright red and frothy, from its admixture with air. In treating hemoptysis the head and shoulders are elevated and an ice-bag or an ice-poultice is applied to the chest; crushed ice may be given the patient to swallow. Equal parts of vinegar or lemon-juice and water, given in teaspoonful doses, or a quarter of a teaspoonful of dry salt, may assist in contracting the blood-vessels. Rest and quiet should be rigorously enforced.

Bleeding from the stomach is

treated similarly. The blood may be vomited, and the dark-red fluid may contain food; or it may be passed by the bowel. The throat and nose should be carefully examined, as the hemorrhage may have originated in these parts and been subsequently vomited.

In nosebleed the head and arms should be elevated, and pressure with the fingers should be made on the nostril from which the blood is coming, or a small piece of lemon or a small piece of cotton wrung out of vinegar and inserted will contract the blood-vessels. The patient should not blow the nose, as it will disturb the formation of clots. Ice may be applied to the back of the neck and to the forehead.

CONTAGION AND IGNORANCE.

It is absolutely unnecessary for your children to have measles, scarlet fever, whooping cough, etc., in order to grow up. You often hear the expressions, "The younger they have it the better," and "They might as well have it now as later on." Having some contagious diseases today is a mark of ignorance or neglect. "Contagion is an offspring of dirt, a relative of disease, and a chum of death. It springs from neglect and is a result of excuses." It jumps at the children as do all cowards, and adds to their burden of environment and heredity

by weakening resistance. Nearly all contagious diseases leave their mark. It may weaken the heart, the lungs, the kidneys, muscles or nerves. Some mothers deliberately expose their children to contagion. This is nothing short of a crime. Contagion is not a necessary evil. It is preventable and is spread by carelessness. Because contagion may leave no visible marks is no evidence that the ill health arising at some future time is not a direct result of contagious disease. Contagion loves stealth and its most dangerous marks are those invisible to the layman.—*Exchange*.

HOW ABOUT IT, MR. TAXPAYER?

Each vaccination undertaken by the Health Department for the prevention of small-pox cost the city 38 cents. This cost includes the services of the

physician and nurse, vaccine, disinfecting, reinspection and records.

Each case of small-pox which the Health Department must take care of at its contagious disease hospital costs the city at least \$47.50.

PATENT MEDICINES

The advent of spring with its harvest of illness and disease generally always brings with it a large crop of nostrum advertisements whose writers believe in "making hay while the sun shines."

We would not object to these individuals making hay, if they only made it while the sun was shining. If the innocent public had a little more sunlight on these "cure-all" concoctions, there wouldn't be enough hay made to feed the skunks that furnish the oil for these mysterious mixtures.

If anyone needs honest advice it is the sick and discouraged individual who is staking his last dollar on the

satanic promises of the patent medicine advertisement.

A "cut-rate store," the Economical Drug Company of Chicago, started on a campaign to fight the nostrums and displayed the following sign in the window:

"Please do not ask us what any old patent medicine is worth, for you embarrass us, as our honest answer must be that it is worthless.

If you mean to ask at what price we sell it, that is an entirely different proposition.

When sick, consult a good physician. It is the only proper course, and you will find it cheaper in the end than self-medication with worthless "patent nostrums."

Some Interesting Data On The Much Advertised Patent Medicines Of Today:

Dr. Edward's Olive Tablets are purgative pills sold under claims that are either directly or inferentially false. The public is given the impression both by the name of the preparation and by the claims in the advertising that these pills owe their value to the presence of olive oil. For instance: "They oil the bowels." "They are a purely vegetable compound mixed with olive oil." They are very small and a dose consists of one or two tablets. If they were composed wholly of olive oil, the amount of oil taken at a dose would be so hardly small as to be negligible and useless for the purpose recommended.

As a matter of fact, instead of being composed of oil they are hard,

black, green coated tablets. Cursory tests in the association's laboratory indicated that they were essentially an aloes pill, although they go to the public as a "new laxative."—*Journal American Medical Association*.

Report on Jad Salts from Dr. Harvey W. Wiley's book on 1,001 tests of foods, beverages and toilet accessories.

"A shot gun prescription which "cures" too many diseases at once consists principally of sodium phosphate, sodium and potassium bicarbonates and citric and tartaric acids, and a very small amount of hexamethylene — tetramine, antiseptic diuretic, as stated on the label. Odor of formaldehyde showed partial decomposition of last named ingredient. Miscellaneous drugging of this kind is

useless and often attended by an element of danger. Seventy-five cents is an exorbitant price for four ounces of this material."

"California Syrup of Figs is a laxative whose chief asset is its name. For years the general public has held the idea that figs possess a particular valuable laxative effect, and the manufacturers of Syrup of Figs have attempted to capitalize this popular

fallacy. For years their preparation was put out labeled "Syrup of Figs." The impression was given that the laxative effect of the patent medicine was due to the figs in it. Such was never the case. The purging action of this nostrum has been, and is, due to senna, which in the form of an elixir, makes up 25 per cent of the preparation."—*Journal American Medical Association*.

LAUGH WITH US—TO LAUGH IS HEALTHFUL; It Aids Digestion And Drives Dull Care Away.

JEST SO!!

A boy was asked which was the greater evil, hurting another's feelings or his finger.

"The feelings," he said.

"Right, my dear child!" said the gratified listener. "But why is it worse to hurt the feelings?"

"Because you can't tie a rag around them," answered the child.—*Journal A. M. A.*

BY PROXY.

Bessie had a new dime to invest in ice cream soda.

"Why don't you give your dime to missions?" said the minister, who was calling.

"I thought about that," said Bessie. "but I think I'll buy the ice cream and let the druggist give it to the missions."—*Christian Herald*.

ACCUSTOMED TO DANGER.

It was necessary for one man to stand up and draw the enemy's fire. A soldier volunteered and fortunately not one of the bullets struck him.

When the charge was over, the captain said to the brave fellow, "Where did you get the wonderful nerve to stand out there and make yourself a target for the bullets of the enemy?"

The other smiled.

"For five years," he answered, "I was a guide in the Maine woods."—*Boston Transcript*.

THE OLD RELIABLE.

A gentleman who was visiting his lawyer for the purpose of making his will insisted that a final request be attached to the document. The request was, that his Ford car be buried with him after he died. His lawyer tried to make him see how absurd this was, but failed, so he asked the gentleman's wife to use her influence with him. She did the best she could, but she also failed.

"Well, John," she said finally, "tell me *why* you want your Ford car buried with you?"

"Because I have never gotten in a hole yet but what my Ford could pull me out," was the reply.—*Journal A. M. A.*

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

January, 1918.

Annual Death Rate per 1000.....	10.84	Population of U. S. Census.....	373,857
Annual Birth Rate per 1000.....	23.12	Population (Est.) 1917.....	445,000
Annual Death Rate, Males.....	5.6	Annual Death Rate, Females.....	5.2
Annual Birth Rate, Males.....	12.	Annual Birth Rate, Females.....	11.6
Death Rate less, Violence.....	10.3	Birth Rate less, Still Born.....	22.9

Deaths recorded	402	Births recorded	576
Marriages	318		

BIRTHS.

SEX.	COLOR.	BIRTHS.	BY WARDS.
Males.....444	White.....872	First	27
Females.....432	Colored.....4	Second	30
REPORTED BY		Third	34
Physicians	644	Fourth	17
Midwives	225	Fifth	27
Others	7	Sixth	30
NATIVITY OF PARENTS.		Seventh	33
Both		Eighth	38
Parents Father Mother		Ninth	28
Milwaukee	73	Tenth	21
Wisconsin	225	Eleventh	42
United States	50	Twelfth	38
Germany	44	Thirteenth	31
Poland	50	Fourteenth	66
Austria	45	Fifteenth	9
Bohemia	2	Sixteenth	15
Sweden	—	Seventeenth	41
Italy	30	Eighteenth	14
Roumania	—	Nineteenth	24
England	3	Twentieth	39
Holland	1	Twenty-first	37
Norway	3	Twenty-second	36
Slavonia	3	Twenty-third	25
Hungary	31	Twenty-fourth	42
Russia	41	Twenty-fifth	21
Canada	2	Hospitals	111
Greece	11	Pair of twins.....	8
Known	—	Triplets	—
Unknown	—	Illegitimate	25
Ocean	—	Still born	57
Elsewhere	8		

NATIVITY OF PARENTS.

Both	Father	Mother
Milwaukee	73	54
Wisconsin	225	80
United States	50	56
Germany	44	35
Poland	50	10
Austria	45	6
Bohemia	2	—
Sweden	—	—
Italy	30	2
Roumania	—	2
England	3	3
Holland	1	—
Norway	3	2
Slavonia	3	—
Hungary	31	5
Russia	41	5
Canada	2	6
Greece	11	—
Unknown	—	14
Ocean	—	—
Elsewhere	8	5

MARRIAGES REGISTERED.

Groom	Bride	White	Colored	Others
Oldest	80	56	169	169
Youngest	18	15	6	6
Widowed	23	14	—	—
Divorced	7	8	—	—

NATIVITY.

Both	Groom	Bride	Both	Groom	Bride
Milwaukee	7	5	England	—	1
Wisconsin	57	26	Holland	1	1
United States	9	11	Norway	—	—
Germany	1	6	Slavonia	—	—
Poland	5	1	Hungary	6	2
Austria	12	5	Russia	13	5
Bohemia	1	—	Canada	1	1
Sweden	—	1	Greece	—	—
Italy	1	3	Elsewhere	1	2
Roumania	—	—	Total	114	61

AGE.

Groom	Bride
Under age	15
Under 25	59
25 to 35	64
35 to 45	19
45 to 55	13
55 to 65	4
65 to 75	—
Over 75	1

RESIDENCE.

Groom	Bride
Outside State	14
Outside City	20
Married outside State.....	10

CEREMONY.

By Judges	17
By Justices	4
By Ministers	154

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.
Total Deaths.....	527	635	571	479	451	425	336	358	*384	395	386	402
Annual Death Rate.....	14.37	17.31	15.67	13.06	12.3	11.58	9.1	9.76	10.47	10.77	10.52	10.84
Cases and Deaths.....	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases
Typhoid Fever.....	6	13	2	4	8	3	2	1	4	1	5	1
Measles.....	32	112	2	4	327	1	174	0	118	0	255	8
Scarlet Fever.....	433	564	7	10	244	8	102	12	38	0	197	1
Whooping Cough.....	54	177	5	17	175	9	145	3	153	3	188	9
Diphtheria.....	67	7	5	5	66	7	55	6	94	1	38	1
Influenza.....	7	50	4	1	0	0	0	0	13	8	52	4
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0
Poliomyelitis.....	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis Pulm.....	52	28	30	28	103	32	90	38	75	22	68	21
Cancer.....	27	38	25	9	29	25	26	21	40	24	17	31
Meningitis.....	7	4	6	10	5	5	7	7	6	3	6	6
Apoplexy.....	24	27	28	28	25	25	25	14	10	22	18	0
Org. Heart Disease.....	32	48	46	35	53	40	40	24	31	30	24	32
Bronchitis.....	27	16	15	7	11	10	4	7	7	11	5	0
Pneumonia.....	125	147	116	72	39	25	26	26	37	22	47	0
Diarrhoea—Under 2.....	16	20	21	20	19	6	19	35	20	22	28	0
Nephritis.....	25	25	26	27	25	35	27	27	17	28	27	0
Congenital Debility.....	26	21	31	24	23	36	20	20	21	21	29	0
Senility.....	15	16	5	6	3	7	4	3	7	6	3	0
Violence.....	26	26	35	19	38	43	34	34	31	44	8	21
Suicide.....	6	6	8	4	5	5	13	9	3	8	9	0
Homicide.....	0	0	3	2	2	2	1	3	2	1	0	0
Under 30 days.....	55	57	53	33	39	50	36	30	31	32	48	0
Between 30 days & 1 year.....	68	83	69	54	47	17	32	50	39	43	35	0
1 to 5 years.....	34	57	50	53	30	27	26	31	26	18	18	0
5 to 60 years.....	205	212	248	203	213	191	153	156	164	190	174	0
Over 60 years.....	165	197	151	136	122	140	89	91	124	112	111	0
Age at Death, all ages.....	35.8	37.6	35.5	36.5	36.8	39.2	34.5	34.9	45.6	38.5	37.8	0
Age at Death, over 5 yrs.....	53.6	54.7	50.5	50.3	48.1	51.2	46.5	50.6	59.7	50.5	51.2	0
Public Ins. Cons.....	123	95	135	109	114	102	89	75	101	108	94	0

* Rabies 1 death. Anthrax 1 death.



HEALTHGRAMS



"Most of the illnesses against which treatment is given are due to violation of right living."—WARBASSE.

* * *

ORDER EARLY.

Health can be bought.

Do not wait for your supply to be exhausted before placing your order.

* * *

If some people received as much time and attention as their death certificates, they would require none.

* * *

Health is the only commodity whose price is lowered by increased demand.

* * *

If you must be a hoarder, hoard up health, because there is enough to go around.

* * *

We are now worrying more about birth certificates than births.

* * *

Many communities do not spend enough money for health to buy each person a cheap cigar or a bag of peanuts.—*Exchange*.

* * *

HEALTH is an interest-bearing asset—

DIRT, DISEASE and DEATH are liabilities borne on the books of the Commonwealth.—*Connecticut Health Bulletin*.

MARY'S LITTLE COLD.

Mary had a little cold,

It started in her head.

And everywhere that Mary went

That cold was sure to spread.

It followed her to school one day,

There wasn't any rule.

It made the children cough and sneeze

To have that cold in school.

The teacher tried to drive it out,

He tried hard, but—kerchoo-oo!

It didn't do a bit of good

For teacher caught it too.

—Lyda Allen DeVilbiss.

It is just as foolish to expect to keep well and strong while living daily in foul, dirty air as it is foolish to try to keep in good condition by eating three times a day meals prepared from food materials which are not fit to eat.—*Carolina State Bulletin*.

Don't get the idea that good health is merely absence of disease or sickness. It is far more. One may not feel sick at all and still be only 60, 70, or 75 per cent efficient. Good health is 100 per cent of physical efficiency. It is that physical state of being where life is a joy, and plenty of hard work is a pleasure.—*Exchange*.

NO Health Department, State or Local, Can Effectively Prevent or Control Disease Without Knowledge of When, Where and Under What Conditions Cases are Occuring.

*U. S. Public
Health Service*

617.09

M64b

UNIVERSITY OF CALIFORNIA
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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

MARCH, 1918.

Vol. 8, No. 3.

Save

100,000

Babies!

U. S. Children's Bureau

Bulletin of the Health Department, March, 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

E. V. BRUMBAUGH, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS JEANETTE HAYS,
Public Health Nursing.

MISS HARRIET KETTER,
Social Service.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

CHILD WELFARE DIVISION.

Telephone, Main 3715.

Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M.

Saturday afternoons and Sundays, Closed.

The division handles matters relating to the physical welfare of children under two years of age and to the physical welfare of mothers and prospective mothers. Its nurses give instructions in the care of infants, but are "visiting nurses" only—they do not undertake bedside nursing or assist either during or after confinement except in an advisory way.

The division also arranges for the care of illegitimate children; supervises midwives; supervises day nurseries; supervises so-called Baby Farms; supervises Lying-in-Hospitals and Maternity Homes; conducts mothers' classes and conducts "Little Mothers'" classes for girls.

CHILD WELFARE STATIONS.

Weil St. School, Cor. Weil & Lee Sts.
Lincoln Home, 601—9th St.
Forest Home Ave., cor. 10th Ave.
3rd Ward Barracks, Detroit & Jackson Sts.

St. Casimir's School, cor. Bremen & Clarke Sts.
5th Ave., cor. Hayes Ave.
St. Mark's Church, 4th & Court Sts.

During the summer months, an Infants' Fresh Air Pavilion is operated at Waterworks Park.

Visiting Hours, 2 to 4 P. M.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

MARCH 1918

100,000 Children To Be Saved In 1918

The Children's Bureau, U. S. Department of Labor, has decided that April 6th, the anniversary of America's entry into the war, shall be the date for the inauguration of the nationwide "drive" to save 100,000 babies in 1918.

Each year 300,000 American children under five years of age die. Public health authorities agree that half of these deaths are easily preventable. We do not yet know how many out of this 100,000 Wisconsin must save, but whatever our quota, we must keep up the reputation of Wisconsin made in other "drives" and exceed our quota; not so much to prove our loyalty to our country as to fulfill our duty toward our little helpless babies.

We hope that this child welfare campaign will not only save 100,000 babies this year, but will convince the most skeptical that health within certain limitations is purchasable and that infant mortality is decreased by increased child welfare budgets.

Saving lives is a big task; a large undertaking requires a powerful or-

ganization; a large plant requires an enormous capitalization; you can't run a million-dollar corporation with a few thousand dollars.

Wisconsin spends over \$22,000,000 annually to give about 600,000 children of school age an education, and about \$30,000 to give health to 256,000 under school age. About eleven cents a year is spent on a child under five years and about \$36.00 for a child over five years.

Wherever there are enough children of school age to require a teacher, there are very apt to be enough children under school age to require a nurse.

It is just as great a mistake to entrust the health of children under five years to their parents as to expect children of school age, with a little outside assistance, to be educated by their parents.

If as much money is appropriated for the first five years of a child's life as there is for the first five years in school, this country will have no difficulty in decreasing the present infant mortality rate, 100,000 a year.

If every home in the United States—there are 20,000,000 of them—should waste on the average one-half cup of milk daily, it would mean a waste of 2,500,000 quarts daily—912,500,000 quarts a year—the total product of more than 40,000 cows.

Spread Of Communicable Diseases.

By E. V. BRUMBAUGH, M. D., *City Epidemiologist.*

The city of Milwaukee is now apparently in the midst of a rather widespread epidemic of measles and of children's diseases. All sections of the city appear to have considerable numbers of these diseases and it seems important to call the attention of the public to the fact that measles, while generally regarded as a children's disease and one of slight or negligible importance, is nevertheless a much more serious disease than it is customarily regarded to be.

In the year 1916 there were 101 deaths in Milwaukee from measles and only forty-one deaths from scarlet fever and seventy-three from diphtheria. It will thus be observed that in this year there were nearly as many deaths from measles alone as from both diphtheria and scarlet fever.

Our knowledge of the means through which communicable diseases are spread through the community have taught us that one of the most important ways in which these conditions spread from individual to individual is through the neglect of what are supposed to be common colds. "Colds," it is well known, are distinctly communicable from one person to another. We know that when one member of a household contracts a cold that as a rule various other members of the same household become infected. We are familiar with the fact that when one child in a school room suffers with a cold that the whole room soon shows the same condition. We also know that indi-

viduals suffering with a cold are unable to do the same efficient work that they are able to do when in an uninfected condition.

Measles, like many other contagious diseases, usually begins with the symptoms of a common cold: watering of the eyes, running of the nose and stuffiness of the head, and in this stage of the disease is probably more infectious than at any other. Similar symptoms are likewise observed in other contagious diseases, as mumps, diphtheria, scarlet fever and infantile paralysis. There is usually some fever at the onset of the disease. These initial symptoms are common to all of these infectious conditions, and in the early stage of the disease it cannot be determined whether the child has merely a common cold or is showing the initial symptoms of a communicable disease. It is, therefore, of the utmost importance that these early symptoms should not be neglected. Children suffering with what is supposed to be a common cold should be kept away from other children in the family. They should not be permitted to attend school and the family physician should be promptly called upon the appearance of the slightest rash, eruption or swelling of any glands.

It is not necessary nor is it wise or advisable that children should be exposed to "children's diseases" and their general health will be much improved by carefully protecting them from these infections which are by no means of a light nature nor to be neglected or minimized.

The Most Common Causes Of Deafness, And Its Prevention.

BY FRANZ PFISTER, M. D.

Have you ever noticed that blind people almost always look contented and often quite happy, particularly so, if their affliction has been with them all their life, whereas the deaf, especially if their affliction has been acquired later in life, appear dissatisfied, morbid, suspicious and some even melancholic?

This can be accounted for from the fact that humans cannot do without the sound of the human voice or conversation, for very long, without becoming severely disturbed. Prison authorities make use of this fact where special severe punishment seems indicated, in the form of solitary confinement.

The deaf finds himself isolated from the rest of the world, which isolation is only limited by the degree of his affliction, while the blind person enjoys the social relation with those around him. To be in company and not understood, or to misunderstand what is being said or what is going on, seems much harder to endure than to be able to hear and not to see.

The blind do not seem to bother much about things they can't see, but the deaf person is everlastingly aggravated by what escapes him. It is not at all surprising that he or she becomes suspicious and dissatisfied with life. If we take into consideration the fact that perhaps 70 per cent of all the patients with defective hearing also have to endure subjective or head noises, sometimes of the most aggravating, nerve-wrecking, sleep-prevent-

ing kind, we can realize how pitiful the plight of the patient and how important the prevention or any promise of relief must be. Not only is it the mental suffering alone we must think of, but also the deficiency in earning power, which means much to the community and surely to the individual. A deaf person is practically excluded from the learned professions, exceptions notwithstanding. The same holds good with regard to business chances and even in the factory with the recently introduced medical examination his chances for work are very slim. He is limited very much, indeed, in his opportunities to make a living.

A young woman will have difficulty in securing employment even as a hired girl if she is deaf, and the matrimonial outlook must be very discouraging to her.

Much has been done to prevent blindness, and in fifty years from now a blind person will be just as rare a thing to see on the street as a pockmarked victim of smallpox.

Conditions are not so promising with regard to defective hearing for the reason, that unfortunately the public and even some members of the medical profession are not sufficiently awakened to the underlying facts and to their responsibilities. The progressive physicians, the health and the school authorities have done wonderful work to stamp out impaired hearing and deafness, and it is our duty to assist them whenever possible by in-

forming the public. These diseases are almost always acquired either very early or else in late life. They are to a large percentage preventable, particularly those forming in childhood. There is in most cases of hard hearing such a thing as a cure, at least an improvement with timely and judicious treatment.

Each ear has a canal called the Eustachian tube, which is about the size of a goose quill, and extends from the inside of the nose to the middle ear. This tube must remain open, or the hearing will suffer or be lost altogether.

Almost all ear troubles come by way of this tube, very few develop through the outer ear. It is therefore very important that the surroundings of that tube, where it opens into the nose, be kept healthy.

Unfortunately, adenoid growths, enlarged tonsils (not healthy ones) and polyps, or inflammations such as occur in scarlet fever, measles, diphtheria, la grippe and severe colds, or

deformities inside of the nose may obstruct the Eustachian tube and in that way communicate the disease to the ear. Particularly is this likely when the nose is blown very hard.

The secret in the prevention of ear troubles and deafness is to keep the nose free and open, which very frequently can be done with medicines, or by operation when a permanent obstruction exists. The nose should not be douched.

Parents must from time to time test the hearing of their child and if an abnormality is discovered, not be satisfied with the consolation: "It will outgrow it."

Ears must not be allowed to be running or discharging, because this is dangerous to hearing and to life.

In those rare cases, where a child has been born deaf and no help can be promised by the ear-physician, the parents should see to it that lip-reading is taught early in order that the unfortunate child is given a fair chance in life.

HINTS ON HOME NURSING.

1. Write down all the doctor's orders. Do not depend on your memory.

2. Never give medicine without first reading the directions on the label at least twice. This saves accidents.

3. Household spoons vary in size. A medicine glass with the quantities marked clearly on the side is safest.

4. Keep all medicines for external use apart from those required for internal use.

5. Keep the sick-room at as even a temperature as possible. Hang a thermometer on the wall beside the

patient's bed about the level of the pillow. The room temperature—unless otherwise ordered by the doctor—should be 60 to 65 degrees Fahrenheit.

6. Have a constant current of pure air in the room. A window-board is the simplest way to ventilate. Twice daily the windows should be opened wide to give the room a thorough airing. For a sick child nothing is so good or so cheap as pure air, nothing so bad or so expensive for his recovery as foul air.

7. Never keep food in the sick-room. Milk should always be kept on ice, well covered from dust and flies.

Serve the child's food in as dainty and attractive a way as possible. Remove the child's tray as soon as he is satisfied.

8. Thoroughly scald all dishes and utensils used by a sick child, no matter what the nature of the illness may be. It is well to boil all bed-linen before sending it to the laundry.

9. Keep the bowels open daily.

10. Don't drug your child with household remedies or medicines suggested by well-meaning relatives or neighbors. When your child is sick enough to need medicine, he is sick enough to have a doctor.—*Dr. B. Wallace Hamilton, in the Delineator.*

PREVENTION IS BETTER THAN CURE.

One of the most successful of our innovations is the medical inspection of school children. Astonishing are the results already achieved. Many a child who has been condemned as stupid or whipped for faults, has been shown to have a pathological basis for its derelictions—it did not get its lessons because it could not hear the teacher or see its books, it was dull from adenoids, intoxicated from pus-foci, handicapped from disease transmitted from ancestry or absorbed from insanitary surroundings, at home or in the school itself.

The number and variety of physical defects revealed by investigation is amazing. Twenty-five per cent of all school children are asserted to have scoliosis; an equal number have bad eyesight; five per cent have defective hearing; three per cent suffer impediments of speech. Some estimate the feeble-minded at four per cent, which would make 800,000 in the country at large, of whom 100,000 are so badly mentally affected as to deserve treatment in institutions.

Yet, school inspection is a very new thing and the medical profession is only beginning to acquire a practical education upon it. The methods and their application still are experimen-

tal—then what may not be the results when study and experience have developed them?

Immense as are the benefits to be derived from inspection of the schools and the attending children, this is but a beginning. The place for such work is the home. How much better if every family were under the sanitary supervision of a particular doctor who is paid a salary for doing his uttermost to keep people well. Why wait for the child to fetch to its fellows at school the evils of a bad hygienic environment, a vicious moral invironment, in its home?

There is a certain sense of opposition to the "public doctor," as every man who has acted as vaccine-physician knows; but, every poor family takes a certain pride in "our own doctor" that makes his work as easy as that of the municipal official is hard.

The detection of disease-carriers and their segregation from other children constitutes a great advance; but, far better inspect the home conditions that permitted the development of typhoid fever or diphtheria or dysentery or any other impartable malady.—*American Journal of Clinical Medicine.*

USE MORE MILK.

OSMORE R. SMITH, *Secretary Department of Public Welfare,
Milwaukee County Council of Defense.*

Many persons have gathered the impression from statements issued by the United States Food Administration urging the conservation of milk, that the government desires consumers to decrease their use of milk. This is in no sense the wish of the Food Administration. What the government has asked is that every drop of milk be used, particularly in view of its great value as a human food. In the past when there has been a surplus of milk products, much of this milk has been wasted. Milk has been skimmed, the cream utilized and the skimmed milk thrown away, although skimmed milk is comparable as a food to such high priced protein foods as meat and eggs.

This is the condition which the Food Administration asks us to guard against. "Use all the milk. Waste no part of it," is its admonition. Use the milk, both whole and skimmed, sweet and sour. In any form it is infinitely too valuable as a food to be wasted, particularly at a time when food is the most serious problem which confronts the world.

Milk is probably the best all around food known to man. We eat chiefly for two reasons: First, to renew the body waste and promote growth by forming new tissues and fluids; second, to supply energy for carrying on the body functions. Milk contains the body-building materials—protein and mineral substances, such as lime and phosphorus—and also the fat and sugar elements which supply energy.

The Bureau of Animal Industry of the United States Department of Agriculture is authority for the statement that one quart of whole milk is equal to seven ounces of sirloin steak for its protein, and eleven ounces for its energy. In protein value it is equal to four and three-tenths eggs and in energy value to eight and one-half eggs. To put it in another way, if milk is selling at ten cents a quart, sirloin steak must sell as low as 23.3 cents a pound, and eggs at 25.1 cents a dozen, to supply protein at equal cost. To supply energy at equal cost when milk sells for 10 cents a quart, sirloin steak must not cost more than 14.2 cents a pound, and eggs 13.2 cents a dozen. No one in Milwaukee has purchased either sirloin steak or eggs at these prices in a number of years. Clearly, then, it is very poor economy to decrease one's consumption of milk.

Milk can be used in a variety of ways, and in all of these ways it is an excellent food. Every growing child should have at least one glass of whole milk at each meal. For children milk has no substitute. Skimmed milk can be used in cooking and in making cottage cheese. Buttermilk is extremely nourishing as a beverage, and is recommended by many physicians in the treatment of certain intestinal disorders. Sour milk is equally valuable in cooking.

The average consumption of milk in the United States is little more than one half-pint daily. Considering

its extreme food value, and its relative cheapness as compared with other foods, this average should be increased, rather than decreased. If we

were to amend the milk slogan of the Food Administration, we should say, "Use more milk. Utilize all the milk that you get. Waste not a drop of it."

IS A BABY WORTH SAVING!

It seems almost inhumane to estimate the value of a child's life in dollars and cents, but we feel that many times money speaks louder than sentiment, and since it is financial support that is needed to save the lives of babies, we feel justified in making our appeal entirely on economic grounds. In estimating the cost of a baby, it does not seem accurate to begin with the birth of the child. If the prospective mother has been going out for work, she will be compelled to discontinue this work in the latter months of pregnancy. If she is a woman who does not go out to work she will probably have some one come in and do her heaviest work every week. No one can deny the fact that pregnancy decreases the average woman's earning capacity either in her home or outside of her home at least \$2.00 per week for an average of twenty weeks.

Without adding any other extra expenses, such as drugs, special foods, medical service, etc., the child costs at least \$40.00 before its birth. The

average confinement, including the doctor's fees, medical supplies, extra help and food, will cost at least \$30.00.

The Junvenile Court of Chicago estimates that it takes about \$6.00 a month to take care of a new baby in a family.

These figures would show that the minimum expense of a baby one year old is \$142.00. If the baby dies at one year we have to add the expense of a funeral. Coffins and hearses cost more than cradles and go-carts. No one can accuse us of exaggeration if we say that a child dying at one year is a financial loss of \$242.00 to somebody.

In 1917 there were 1104 deaths under one year in Milwaukee. According to authorities one-third of all infant deaths are preventable, which means that 368 babies under one year died which should have lived. At the rate of \$242.00 per life there was a loss of \$89,066 which could have been prevented.

Does it sound like a gold brick proposition if we state that an investment of about \$20,000 would have prevented this \$89,066 loss?

Every can of vegetables or fruit and every jar of preserved food means you have saved food that would have otherwise been wasted.

* * *

"You can lead a horse to water, but you cannot make him drink." You can lead the people to health, but you cannot make them swallow it.

PATENT MEDICINES

It is very difficult for the unsophisticated layman to understand how anyone can question the curative power of "Dr. Quack's Panacea" when the daily newspapers are filled with testimonials from a large variety of individuals, whose health and lives were presumably saved by this much advertised patent medicine.

"Speaking generally, it may be said that in all my experience in this office never has a medical concern, no matter how fraudulent its methods or worthless its treatment, been unable to produce an almost unlimited number of these so-called testimonial letters."—*U. S. Attorney General.*

"The investigation, by the Propaganda Department of The Journal of the American Medical Association, of hundreds of testimonials for proprietary medicines has brought out the following facts:

Testimonials are in fact the sheet anchor of medical advertising. Because of their supposed appeal to experience, their commercial value is large; because the testimony of those who give them is not competent, their scientific value is nil. Some of them are purchased; others are faked outright and originate either in the office of the "patent medicine" concern or in the office of the agencies handling the "patent medicine" advertising; most testimonials, however, are genuine from a documentary standpoint and have been written in good faith.

The inquiry has shown also that in the cases of testimonials for "cancer cures" and "consumption cures" written by those who really had cancer

or consumption it was only necessary to wait some months and the death certificates of those who wrote the testimonials would be available; in the cases of those who have claimed to have been cured of epilepsy or deafness or hernia a wait of a year would usually bring the admission from the individuals that they were still epileptic, still deaf or still ruptured. Investigations of testimonials for nostrums of the cure-all type, coming as most of them do from persons who suffered from some mere passing indisposition, gave different results. These people will maintain to the end of the chapter that, in their opinion, the remedies in question positively cured them.

The basis of the testimonial fallacy is the universal disposition to give credit to artificial agencies for results that are really due to natural causes. The human body and its processes are so complex that the average person is unable to distinguish between cause and effect and a mere sequence of events. The tendency of nature is, in a great majority of cases, towards a cure, and the man who takes a "patent medicine" for some passing indisposition invariably credits his inevitable recovery to the medicine instead of to nature, where the credit really belongs."—*Testimonials, Medical and Quasi-Medical, A. M. A.*

Mr. Samuel Hopkins Adams in the New York Tribune, February 21, 1915, writes as follows:

"Prod a fake and the voice of its protest is a testimonial. No matter how explicit you make the charge of

fraudulency, there is always a retort ready to hand.

"Read what the Rev. Mr. Simp, and the eminent foreign specialist, Dr. Coyne Hunter, and the influential financier, Banker Bunk, say of us. How can any one accuse us of wrong doing when such great and good men lend us their names. Here are the original documents in proof."

You will probably be surprised, then, to be shown the original testimonial of Col. Henry Watterson singing praises to "Sanatogen," a 95 per cent cottage cheese preparation. While you are gasping for breath,

Miss Julia Marlowe endorses Peruna; Miss Anna Held is delighted with "The Cascade," Madame Schumann-Heink thanks Dr. Peter Fahrney & Sons for their Blood Vitalizer, and Madame Sarah Bernhardt is convinced that Paine's Celery Compound is the most powerful nerve tonic that can be found.

At this point you will either have to be convinced that testimonials can be obtained almost from anyone concerning anything or there is no reason why anyone should be ill or die with these patent medicines at our disposal.

LAUGH WITH US—TO LAUGH IS HEALTHFUL; It Aids Digestion And Drives Dull Care Away.

AN ENGLISH MEDICINE ADVERTISEMENT.

Wanted: A gentleman to undertake the sale of a patent medicine. The advertiser guarantees it will be profitable to the undertaker.—*Exchange.*

NO DANGER.

A number of physicians were seated in the smoking compartment and the talk naturally turned to germs and their dissemination. Just then the porter entered, waving his whisk-broom.

"Brush you off, suh?" he asked of the doctor nearest him.

"Here," said the doctor, indicating the whisk-broom, "is one of the finest of systems of spreading germs that has ever devised. This porter comes and he brushes me off; then he brushes you, and you, and you, and every one else; and starts a lot of germs flying

about in the air, to be breathed in and start disease. I say that germs ought not to be disturbed in public. It's dangerous. They ought to be let alone—not thrown into the air by all this brushing."

There was a moment of silence, during which the porter grinned. He waved his brush.

"Come on, Doctah," he said. "and let me brush you off. Don't let dat idea about microbes bother you. What little brushin' I'se goin' to do ain't goin' to disturb no germs. No, suh!"
—*Journal A. M. A.*

SCIENTIFIC TREATMENT.

"What are you carrying a cane for?"

"I'm having a deuce of a time with water on the knee."

"Why don't you try wearing pumps?"
—*Puck.*

HISTORICAL COMMENT.

Vice President Marshall, at a luncheon at Atlantic City, was condemning the kaiser.

"From the time he mounted the throne," he said, "from the time he ousted Bismarck and imprisoned his own mother in a castle, he showed what a dangerous bully he was.

"His memory in history will be like

the memory of that other Bill, an East Side one, to whose widow a neighbor said:

"'So Bill's dead.'

"'Yes, he's dead.'

"'I suppose he's hittin' the harp with the angels now.'

"'More likely,' said the widow, 'he's hittin' the angels with the harp.'"

—*Chicago Herald.*

PENCILS AND GERMS.

While fingers are said to be next to flies as carriers of diseases, pencils used in common in the schools may be said to rank third as such carriers. The child is born with the habit of putting things in its mouth. The very first movement of the child when it is born is to put the hand to the mouth. Mothers usually correct the habit of children sucking their thumbs but the habit of putting pencils in the mouth and chewing them is a much more dangerous practice; it is one that may cause the spread of dis-

ease and if not broken off in school may follow one through life. We have seen grown-up men and women, editors and teachers, chewing their lead pencils.

Teachers should watch for this habit in children and correct them. They should be instructed to keep their fingers away from their mouths. The school should provide convenient and adequate facilities for washing and drying and teachers should instruct the children in proper habits of cleanliness.—*Exchange.*

SELFISHNESS AND WASTE.

To a great many families in the United States the price of food is comparatively insignificant. The difference between twenty cents a pound for meat and thirty cents cuts so small a figure in the household budget that it seems not worth bothering about. Such families are usually great wasters of food, and

they have very little selfish motive to economize in the kitchen.

There is barely food enough to go round, with the best management. *Whatever you waste pinches somebody else.* Perhaps you can afford the waste as a selfish individual, but you cannot afford it as a good citizen.—*SATURDAY EVENING POST.*

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

February, 1918.

Annual Death Rate per 1000.....	11.08	Population of U. S. Census.....	373,857
Annual Birth Rate per 1000.....	25.37	Population (Est.) 1917.....	445,000
Annual Death Rate, Males.....	5.87	Annual Death Rate, Females.....	5.2
Annual Birth Rate, Males.....	13.9	Annual Birth Rate, Females.....	11.4
Death Rate less, Violence.....	10.4	Birth Rate less, Still Born.....	24.4
Deaths recorded	411	Births recorded	941
Marriages	183		

BIRTHS.

SEX.	COLOR.	BY WARDS.	
Males.....515	White.....937	First	28
Females.....426	Colored.....4	Second	29
		Third	17
		Fourth	29
		Fifth	27
		Sixth	29
		Seventh	39
		Eighth	62
		Ninth	36
		Tenth	27
		Eleventh	45
		Twelfth	45
		Thirteenth	39
		Fourteenth	52
		Fifteenth	15
		Sixteenth	14
		Seventeenth	33
		Eighteenth	15
		Nineteenth	26
		Twentieth	38
		Twenty-first	44
		Twenty-second	33
		Twenty-third	18
		Twenty-fourth	49
		Twenty-fifth	42
		Hospitals	110
		Pairs of twins	17
		Triplets	—
		Illegitimate	18
		Still born	34

NATIVITY OF PARENTS.

	Both	Father	Mother
Milwaukee	107	33	56
Wisconsin	234	50	113
United States	46	59	57
Germany	32	51	33
Poland	55	32	5
Austria	49	11	12
Bohemia	—	—	—
Sweden	1	1	3
Italy	19	1	—
Roumania	—	—	1
England	2	2	1
Holland	1	—	—
Norway	4	—	—
Slavonia	10	—	—
Hungary	25	1	1
Russia	51	21	3
Canada	—	—	2
Greece	10	1	—
Unknown	—	9	—
Ocean	—	—	—
Elsewhere	3	12	2

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	68	50	White	183	183
Youngest	18	15	Colored	—	—
Widowed	15	11	Others	—	—
Divorced	5	10	Total	183	183

NATIVITY.

	Both	Groom	Bride		Both	Groom	Bride
Milwaukee	7	5	8	England	—	1	1
Wisconsin	56	18	36	Holland	—	—	—
United States	7	26	15	Norway	1	—	—
Germany	3	4	6	Slavonia	—	—	—
Poland	2	2	1	Hungary	6	—	—
Austria	8	5	1	Russia	7	5	1
Bohemia	—	—	—	Canada	—	—	—
Sweden	—	1	—	Greece	2	1	—
Italy	2	—	—	Elsewhere	2	2	2
Roumania	—	1	—	Total	112	71	71

AGE.

	Groom	Bride
Under age	18	5
Under 25	62	110
25 to 35	74	50
35 to 45	21	12
45 to 55	3	4
55 to 65	4	2
65 to 75	1	—
Over 75	—	—

RESIDENCE.

	Groom	Bride
Outside State	8	4
Outside City	25	21
Married outside State.....	13	13

CEREMONY.

By Judges	16
By Justices	19
By Ministers	143

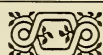
DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.
Total Deaths.....	635	571	479	451	425	336	358	*384	395	386	402	411
Annual Death Rate.....	17.31	15.67	13.06	12.3	11.58	9.1	9.76	10.47	10.77	10.52	10.84	11.08
Cases and Deaths.....	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Typhoid Fever.....	13	2	13	4	8	3	2	7	1	1	8	1
Measles.....	112	2	135	10	4	1	10	38	4	5	315	1
Scarlet Fever.....	564	7	441	10	337	1	12	153	0	255	9	1
Whooping Cough.....	177	5	167	7	175	4	3	38	3	188	3	9
Diphtheria.....	50	5	53	10	66	3	9	98	1	38	1	56
Influenza.....	4	4	1	5	9	8	13	0	8	52	2	48
Small Pox.....	0	0	0	0	0	0	0	0	0	0	0	0
Poliomyelitis.....	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis Pulm.....	95	30	98	26	103	25	78	75	2	68	86	21
Cancer.....	38	25	29	23	25	21	21	2	24	2	35	0
Meningitis.....	6	9	12	10	5	2	7	6	4	17	6	6
Apoplexy.....	27	28	9	25	25	2	14	10	22	3	16	20
Org. Heart Disease.....	48	46	35	53	40	22	24	31	30	24	0	32
Bronchitis.....	16	15	7	10	4	4	7	7	11	5	0	6
Pneumonia.....	147	116	72	39	25	12	26	37	32	44	0	57
Diarrhoea—Under 2.....	20	21	20	19	6	19	35	20	22	17	0	27
Nephritis.....	35	26	37	25	35	27	12	21	28	28	0	25
Congenital Debility.....	21	31	24	23	36	22	20	21	21	29	0	32
Senility.....	16	5	19	9	7	4	3	7	6	3	0	8
Violence.....	26	35	19	38	43	52	34	31	44	31	0	33
Suicide.....	6	8	4	5	4	13	9	6	8	9	0	4
Homicide.....	0	3	2	2	2	1	3	1	17	0	0	0
Under 30 days.....	57	53	33	39	50	36	30	31	32	48	0	50
Ret. 30 days & 1 year.....	83	69	54	47	17	32	39	39	43	35	0	42
1 to 5 years.....	57	50	53	30	27	26	31	26	18	18	0	33
5 to 60 years.....	213	248	203	213	191	153	156	164	190	174	0	161
Over 60 years.....	197	151	136	122	140	89	91	124	112	111	0	116
Age at Death, all ages.....	37.61	35.5	36.5	36.8	39.2	34.5	34.9	45.6	38.5	37.8	0	39.2
Age at Death over 5 yrs.....	54.7	50.5	50.3	48.	51.2	46.3	50.6	59.7	50.5	51.2	0	56.9
Public Instit.....	95	135	109	114	102	89	75	101	108	94	0	87

* Rabies 1 death. Anthrax 1 death.



HEALTHGRAMS



Volunteer to retain your health and do not wait until you are drafted to regain it.

* * *

We have known people who were more determined to get along without the doctor than without the undertaker.

* * *

We believe in tobacco funds for our boys at the front and in milk funds for our babies at home.

* * *

It is a crime to kill a child before it is born, but who cares what happens after its birth?

* * *

"God helps those that help themselves." This seems almost true, when we see how babies lose out.

* * *

Which is true economy for a city—to save a dollar or to save a life?

* * *

Health cannot be ordered from the drug store like food from the grocery store.

DR. CHEERUP.

Call in old Dr. Cheerup when the clouds begin to thicken
 He can help you if you'll give him half a chance.
 When you leave your food untasted and your heart begins to sicken.
 When your mirror shows a dulness in your glance,
 Call in old Dr. Cheerup, with his look of healthful joy
 And his never-failing greeting: "Ho! Why you're all right, my boy!"
 —S. E. Kiser.

FUN AND FIZICK.

A Long Face never maid a Saint, an' a Laffin Kountenents iz the nex' best Thing 2 a Good Square Meel.

Fun iz as Necessary tu the Growin Yungster az Sunshine iz 2 a Kabbage.

Az soon az yu Stop havin Fun you begin 2 hav morgages, Dispepsyay & Bald Heds.

Awl Statistics go 2 sho that very phew Men hav ever died ov 2 much Usefulness.

If u let worry & Patent medicine alone u'll B a long time Dyin.

The man Who Laffs at Seein a little Kat run around after its Tale may knot ever B the president ov a Rale Road, butt he iz 1 u may Trust.

I have moar Konfidence inn a Man who nos How to Laff, than in 1 who Awlways Trys 2 look Dignyfade.

—Dr. R. E. LeeK, in *The American Journal of Clinical Medicine*.

DEMAND MILK FROM **Tuberculin Tested Cows!**

Consumption in cattle is catching.

*You may be "drinking it" with
your milk.*

*It is stupidity to expose your children
to the diseases of dairy animals.*

*Don't do it! Compel your dealer to
guarantee that the product he leaves
at your door each morning is free from
tuberculosis.*

The tuberculin test is the guarantee!

ASK FOR

"Pasteurized Milk from Tested Cows"
THE SAFEST MARKET MILK!

Pasteurization, properly done, safeguards milk against other diseases. It is an excellent additional precaution but must not be considered an adequate substitute for the Tuberculin Test.

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MAY 2 1918

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

APRIL-MAY 1918.

Vol. 8, No. 4-5.

"D OES God fix the death rate? Once men were taught so, and death was regarded as an act of Divine Providence, often inscrutable. We are now coming to look on infant mortality as evidence of human weakness, ignorance and cupidity. We believe that Providence works through human agencies, and that in this field, as in others, we reap what we sow--no more no less."—*Holt*.

Bulletin of the Health Dept., April-May, 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

C. D. PARTRIDGE, M. D.,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.
Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

CHILD WELFARE DIVISION.

Telephone, Main 3715.

Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M.

Saturday afternoons and Sundays, Closed.

The division handles matters relating to the physical welfare of children under two years of age and to the physical welfare of mothers and prospective mothers. Its nurses give instructions in the care of infants, but are "visiting nurses" only—they do not undertake bedside nursing or assist either during or after confinement except in an advisory way.

The division also arranges for the care of illegitimate children; supervises midwives; supervises day nurseries; supervises so-called Baby Farms; supervises Lying-in-Hospitals and Maternity Homes; conducts mothers' classes and conducts "Little Mothers'" classes for girls.

CHILD WELFARE STATIONS.

Weil St. School, Cor. Weil & Lee Sts.
Lincoln Home, 601—9th St.
Forest Home Ave., cor. 10th Ave.
3rd Ward Barracks, Detroit & Jackson Sts.

St. Casimir's School, cor. Bremen & Clarke Sts.
5th Ave., cor. Hayes Ave.
St. Mark's Church, 4th & Court Sts.

During the summer months, an Infants' Fresh Air Pavilion is operated at Waterworks Park.

Visiting Hours, 2 to 4 P. M.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

APRIL-MAY 1918

CHILDREN'S YEAR.

BY GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

In accordance with the plans of the Children's Bureau of the U. S. Dept. of Labor, Milwaukee's campaign to assist in the national "drive" to save 100,000 babies in 1918 is now under way.

The first step in this plan, as outlined by the government, consists in weighing and measuring every child up to six years of age to determine if these children are of the proper weight and height which a child of this age period should have if it is in normal health.

According to the estimates of the Health Department, there are in Milwaukee about 56,000 children up to six years of age. It is hoped that every one of these children will be weighed and measured, and examined, so that the parents may learn if their child is physically normal, and that where necessary the proper advice and care may be given, so that all of these children may grow up in good health.

The work of weighing and measuring will be undertaken free of charge at various stations throughout the city, and will be in charge of especially trained women and nurses under the supervision of physicians.

The exact location of the stations

where the examinations will be undertaken, and the date and time when these stations will be open to the public, will be published from time to time in the daily papers.

Registration cards will be distributed to the various homes where there are children of the age period that are to be examined.

Special literature on the care of infants and children will be distributed free of charge at the stations, and may also be obtained from the Health Department. The bulletin of the Health Department will also contain a series of special articles on infant care, the first of which, dealing with prenatal care, appearing in this issue of the bulletin.

Experience has proved that health or sickness in later life are largely the result of proper and intelligent care in childhood. Parents, therefore, should make use of this opportunity to get for their children such advice and information that will insure for them better health and happiness.

For further details call up the Child Welfare Division of the Health Department, Main 3715, or Miss Catherine C. Washburne, Secretary of the Children's Year Committee of the County Council of Defense, Main 1888.

PRENATAL CARE.

BY DR. G. A. HIPKE.

The object of Prenatal Care is, to see to it that every prospective mother enjoys the best possible health during her pregnancy and to have her attended in the best possible manner during the birth of her child, with the final end in view, namely: that of a live and well child.

Prenatal Care, therefore, resolves itself into the welfare of the prospective mother, in order that she may give birth to a well child and further that she may be able to breast-feed her child.

The mother, you see, quite incidentally profits by the interest we manifest in her child. The time must come when the prospective child will show interest in the health of its father.

Since "Prenatal Care" is a baby-life saving proposition, through the good offices of its mother, it will be interesting to know how this can be done.

It becomes the duty of those who have the Prenatal Care of the prospective mother in hand to watch this woman very carefully and to anticipate any abnormalities and to rectify them when they do exist. Every prospective mother should live under the best possible surroundings; she should be well nourished and yet not be overfed; she should have plenty of sunshine and fresh air; she should be warmly clothed; she should have sufficient exercise and yet she should avoid fatigue; she should have sufficient rest and sleep; she should avoid worry and seek pleasure.

Every prospective mother should engage a competent physician as soon as she becomes pregnant in order that she may have the advantage of his advice from the very beginning. He will help her to overcome the early complications of pregnancy, such as nausea and vomiting. These complications can usually be overcome, if not avoided, by giving close attention to the diet, to her mode of living and elimination.

The physician will examine the urine of his patient at regular and stated intervals; at the same time he will take her blood pressure.

If this is done regularly, almost every case of eclampsia (convulsions of pregnancy) can be avoided and thus the life, often of both mother and child may be saved. It is very exceptional for eclampsia to come on without premonitory signs and symptoms. Therefore, when it does happen we cannot help but conclude, in the majority of these cases, that the patient has neglected to consult her physician, or that the physician has neglected his patient. The lives of many children as well as the lives of mothers are sacrificed today because of neglect of this kind.

During the latter months of pregnancy, attention should be directed by the physician to the care of the breasts of the prospective mother, in order that she may breast-feed her child. If this is done, fully 90 per cent of mothers are enabled to breast-feed their offspring. It is quite important that a mother should breast-

feed her child, because nine non-breast-fed children die before the age of one year to one breast-fed child. More than this, breast-fed children resist disease far better than non-breast-fed children.

The physician should examine every prospective mother several months before labor and thus ascertain the position of the child, the measurements of the mother and the probable outcome of labor. If the physician finds conditions which cause him to doubt that normal labor will ensue, he should formulate plans of treatment while he has plenty of time and not wait until the patient is tired and weak, following hours of suffering from an unsuccessful labor. Many a dead child is born and many a mother is mutilated because of inattention to the above.

The pregnant woman is prone to choose that physician for her attendant who has earned the reputation of not "letting his patients suffer." In other words, she prefers that physician who resorts to the use of instruments without any provocation.

The rule in regard to the conditions for the use of instruments as laid down by authorities in midwifery is almost an iron-clad rule and cannot be misunderstood by any intelligent physician. It has been said that 33 per cent of first births attended by physicians in the United States are delivered by instruments and that 30 per cent of these end with a dead child.

According to our best authorities, the highest rate of forceps deliveries in these cases is never above 10 per cent and that the death rate should never exceed 10 per cent. We can readily see by these figures that hundreds of babies can be saved, if women will only insist that intelligent and judicious midwifery shall be practiced.

It is quite beyond the scope of this paper to enter into a thorough discussion of this important subject, but if it helps in the least to awaken mothers to the importance of Prenatal Care in this baby life saving proposition, then the purpose of this paper has been accomplished.

IS IT HIS WAY?

A case of scarlet fever is reported by a physician. The policeman on the beat placards the house. The health officer visits the case and issues instructions. He tells the family that all contacts must be kept on the premises, away from outsiders and away from the patient. They promise to comply with the regulations. They told the bread-winner can follow his usual occupation providing the patient is confined to one room and does not come in contact with him.

Five days later the case is visited

again by the health officer. He finds the patient downstairs on a couch. Several of the younger brothers and sisters huddling around him. Two larger boys are out on the street playing marbles with three other boys. The mother just returned from the corner grocery store, and altogether conditions are found quite contrary to the health officer's orders. He endeavors to show them that they are doing wrong. He is met with the rebuff that "I don't think the child has scarlet fever," and "I am not

afraid of it." Arguments are futile. In a few days there are two more cases in the family and one next door. One of the children dies. The minister calls to pay his respects. He offers a prayer. One sentence lingers. "The Lord has seen fit to remove this child from our midst. The Lord giveth and He taketh away." The child is buried. An epidemic has been started and there will be other deaths and other burials. Is it the Lord's way?

Did the family think that by not carrying out the orders they were hurting the physician, policeman, health officer, minister or undertaker? Whom were they damaging? No one but themselves. It made more work (more money) for the physician, the druggist, the minister, the undertaker and a host of others. They were hurting only themselves but they could not see it.—*Cumberland, Md., Health Bulletin.*

POVERTY AND INFANT MORTALITY.

It is a well known fact that communities made up of poor families have a higher mortality rate than communities in better circumstances.

As a rule where poverty exists, we find the following missing: proper education, proper food, sanitary and hygienic housing, sufficient clothing, ample medical care and ambition.

Statistics show that infant mortality varies according to occupations, size of homes and scale of wages.

In the upper and middle classes, 76 die out of every 1,000 infants born. In the intermediate class, 106 die. In the unskilled workman class, 152 out of 1,000 die. Among general laborers we have an infant mortality of 196.

219 out of every 1,000 infants living in one-room tenements die. In two-room tenements only 157 die. In three-room tenements 141 die. In four rooms and over, 99 die. 256 infants die out of every 1,000 born, if the father earns only \$10 per week and falls to 84 when he earns \$25 per week.

If infant mortality is increased by poverty and all that goes with it, we can only decrease this mortality rate

by removing the cause; and if poverty is something that cannot be entirely removed, we must at least remove some of the death-dealing factors that accompany it.

No doubt, a great deal of poverty could be eliminated if the employer could be made to realize that when any of his employees are compelled to accept charity, it is not they who are the charity cases, but the employer himself, who thus admits that he can not sufficiently compensate his workmen and asks the public to help him do so. Any industry that cannot pay its workers a wage that will enable them to live under conditions conducive to health ought not to be permitted to exist, for it is a liability and not an asset to a community. On the other hand, we realize that the poor shall be with us always and no matter how high the wages, there will always be a great deal of poverty in our midst.

It will always be up to some one outside of the family to see that the infant receives the proper amount of air, clothing, food and medical attention.

RABIES.

By GEORGE C. RUHLAND, M. D., Commissioner of Health.

Because of the unusual number of rabid dogs and the damage done by these dogs, especially in the south-eastern portion of the state, the Live Stock Sanitary Board of the Wisconsin Department of Agriculture has declared this part of the state under quarantine, and has issued an order under which all dogs within the quarantined area shall be confined, that is, kept in dog-proof enclosures or muzzled.

During the period of this quarantine no dog shall be accepted for transportation by common carriers, nor shall it in any way be transferred from one place to another within this quarantined territory, except when a family is moving from one farm to another within the quarantined area, and then only upon written permit of the state veterinarian.

Any dog running at large unmuzzled shall be impounded or destroyed. The counties affected by this order are Milwaukee, Racine, Kenosha, Ozaukee, Waukesha, Jefferson, Walworth, Dane and Washington. The order, which went into effect April 3rd, will continue for 120 days and thereafter until revoked.

The immediate reason for the formulating of this order by the state authorities has been the great damage done to livestock by rabid dogs. The losses occasioned through them have been estimated at many thousands of dollars.

There is, however, yet another reason for this order, which has also the endorsement of the State Board of Health, and that is the injury that has been done to humans.

Taking the facts on this point as they apply to the City of Milwaukee, it appears that since November, 1917, up to the present writing, more than three hundred people have been bitten by dogs. More than seventy cases of rabies have been found, more than sixty people had to be treated for the prevention of this disease and unfortunately two deaths occurred from rabies.

Leaving out of consideration for the moment the item of expense which is occasioned for the city in furnishing the treatment to those subjected to infection from rabies, it seems absolutely inexcusable and inhuman to permit the continuance and development of a situation which exposes people and mostly children to bodily injury from this source and to an infection that may mean one of the most horrible forms of death.

In view of these facts and in view of the further fact that rabies have been discovered in practically every section of the city, it must be plain that there can be but one line of action and that is to confine or to get rid of every unmuzzled dog running at large. It is questionable at best whether the dog has any place in a modern, civilized community. More often than not he becomes a nuisance, a danger and menace to the public.

Whatever else, however, may be said with regard to this matter, this much is certain. The public is entitled to protection and the Health Department will see to it that it will have this protection and therefore carry out the orders of the state authorities on this point.

Conservation Of Medical Service.

By JOHN P. KOEHLER, M. D., DEPUTY COMMISSIONER OF HEALTH.

There was a time when you were encouraged to be extravagant. The more flour, sugar and meat you purchased, the more you were looked upon as a public benefactor, because you were helping to increase the income of the vendor as well as the producer and thereby increasing business in general.

Times have changed. You are now compelled to economize by reducing your purchases to a minimum.

However, this is not only true with regard to food, but also the case in other necessities of life.

Of late we have often heard the following expression: "My, but it certainly is difficult to get a doctor now."

Before so many medical men enlisted in the government service, there were more than enough physicians to go around. You could call two or three when the baby had colic at 1:00 A. M. and have them all report, select the one that arrived first or looked the most capable and have the others return home without even a "Thank you."

It is no longer thus. The physician has passed from a state of superfluity to a state of independence where he can demand justice. He is no longer compelled to make unnecessary and unappreciated calls just to convince his rivals that he is a busy man.

The few physicians remaining at home to take care of the civilian population will soon be working so hard during the day that it will take a real emergency call to get them out at night. You can no longer let a child

go all week with a cold and finally decide at midnight to have a doctor come immediately.

The question of the physician now is, and justly so: "How long has the baby been sick?" When you say a week, you must not blame him when he tells you that if the baby could go a week with its cold, it probably can wait a few hours longer.

It seems to be rather difficult for many people to realize that a doctor is a human and needs rest and sleep as other people do.

If he is out all night on wild goose chases, he not only is apt to miss very urgent and necessary calls while out, but will also be in very poor mental and physical condition for his next day's work.

If people want their family physician to be like the hero of a book they once read, where the old country physician sacrificed his life for his patients, they should also do a little of the hero act, and follow the example of the book patients by showing their physician proper respect and appreciation.

If in the future you have difficulty in obtaining satisfactory medical service, stop and think! Have you cried "Wolf" many times just to see how quick you could get your physician when your ailment was only an ingrown toenail? Have you always treated him as a necessary evil and insinuated that he didn't know his own mind as much as your mother or the lady next door? Have you always become indignant, when he hinted that it took real money to buy gasoline for his car?

MILK AS A FOOD.

BY J. S. MOORE, EDITOR OF THE MILK DEALER.

It may be a trite saying that milk is a universal food; it is, and its producer, the cow, is the foster mother of the human race. Think it over and see if you agree with this statement.

Nature started the cow in life-producing milk for the sustenance of her baby; man has improved on nature until cows now give too much milk for their young and the character or rather the constituents have been so radically changed in their proportions so that the milk of many cows is too rich for their offspring.

Normal cows' milk was a perfect combination of food for the sustenance and growth of the offspring; it contained sufficient fat to keep the young warm in its outdoor environment; it contained proteins, carbohydrates and ash in proper quantities. Realize that human babies are kept warm by their environment and clothes and that while a normal baby would not double its weight under six months, a calf would double its weight in six weeks.

Too rich milk should not be fed to babies, as there is no necessity for their having an over-supply of fat, but for growing children, it is an absolute necessity. A good supply of milk for children will provide those necessary elements which are now recognized as essential to life and growth. Dr. E. B. McCullum of Johns Hopkins University was the first to discover these elements and is authority for the statement that from no other source can the necessary and sufficient supply be obtained. Did you, my dear madam, ever stop to compare

the differences between the white races and the others; the white race is the only one that makes of milk and its products any extended use and it is a fundamental reason for the difference in size and brain power over the rest of the world's peoples. All the great advances of civilization have come from milk-using peoples and as one difference let me cite that the Japanese are under-sized as compared with the whites and at sixty years of age as wrinkled and dried-up as a white man of ninety. As a complete food for all ages milk is superior to any and according to such a world authority as the Pasteur Institute has been found to be superior to liquor in its stimulating effects on soldiers, with no bad after-effects. A quart is equal in food value to eight eggs; two pounds of chicken; three pounds of fresh codfish; two pounds of salt codfish; three quarters of a pound of lean round beef and four-fifths of a pound of pork chops; at a price of twenty cents a quart it is a cheap food and at the price Milwaukeeans are now buying it every individual, small and great, would be benefited by using a quart a day. If, as some say, milk does not agree with them, they must remember it is a food, as well as a drink, and it should be sipped and not drank as one would water; every swallow of milk should be a small one so that when conglobated by the juices of the stomach it will be easy for these small lumps to be digested, whereas if drank in large draughts it will become conglobated in one large mass that obviously will be hard to digest.

PATENT MEDICINES

One of the most widely advertised patent medicines of today is Doan's Kidney Pills.

The demand for this nostrum is due to several reasons.

In the first place, nearly everybody considers kidney disease a very common ailment, when as a matter of fact it is comparatively rare in people under fifty years of age.

Secondly, the symptoms mentioned in these Doan's Kidney Pills advertisements, as symptoms caused by diseased kidneys, are of such a wide range that every human being will have some of them at some time or another.

One of our daily papers is now advertising Doan's Kidney Pills as follows:

"Kidney troubles are very common in our country. When the kidneys are weak you are likely to feel all tired out and nervous, and to suffer backache, headache, dizzy spells, sharp, darting pains and urinary irregularities."

If there is anyone who hasn't some of the above mentioned symptoms, he

probably needs medical treatment more than those who have, because there is something wrong with any individual who does not at times become tired out.

This same advertisement contains a testimonial as follows:

"About a year ago rheumatic pains and other kidney trouble had me in bad shape. My kidneys were weak and their acting so often at night broke my rest. When I had to lift my hands above my head or bend over, sharp pains darted through my back. Doan's Kidney Pills strengthened my kidneys and back and made me well again."

Upon investigating this testimonial, we learn that it was written by the patent medicine man and signed by a man who did use Doan's Kidney Pills, but never had kidney trouble, but lumbago, which was cured by his family physician.

If you have kidney trouble, you will not know it by symptoms, but by a laboratory examination, and if you really have kidney trouble, you will be able to cure it, if a cure is possible, by not taking patent medicines.

CONSUMPTION CURES.

"The consumptive is peculiarly susceptible to the temptation of giving testimonials as well as believing in their claims.

It has long been known that any change in treatment or in the individual giving the treatment has a psychic effect on the consumptive, re-

sulting in an apparent temporary improvement.

It is during this period that the "consumptive cure" quack gets his testimonial. Some testimonials are being used one and two years after the poor victims who gave them were dead.

In spite of oft repeated and widely spread warnings that cures for consumption are not put up in bottles and cannot be purchased in corner drug stores, the sales of fake remedies for the cure of this disease are apparently increasing.

The National Association for the Study and Prevention of Tuberculosis is authority for the statement that not less than \$20,000,000 is invested in the business of manufacturing and exploiting fake cures for consumption. It is also estimated that the annual income from these concerns and individuals is not less than \$15,000,000.

Of this amount, about one-third is spent for advertising, leaving the tidy sum of \$10,000,000 as profit.

The association aptly styles this sum as blood money taken from ignorant consumptives, who have parted with their dollars without receiving benefits of any kind. As yet no drug has been found that will cure consumption; but under medical guidance it is known that, when taken in time, good food, fresh air, sunshine and rest are the agencies that will avert the progress of the disease and in time effect a cure. Moral—Don't buy bottle goods to cure consumption."

KILL FLIES AND SAVE LIVES.

Kill at once every fly you can find.

The killing of just one fly NOW means there will be billions and trillions less next summer.

The conditions produced by the long and severe winter have made difficult the removal and proper disposal of refuse and filth accumulations that will facilitate the breeding of disease-germ-carrying flies.

Clean up your own premises; see and insist that your neighbors do likewise.

Especially clean "out-of-the-way places," and every nook and cranny.

Flies will not go where there is nothing to eat, and their principal diet is too filthy to mention.

**THE FLY IS THE TIE THAT
BINDS THE UNHEALTHY
TO THE HEALTHY!**

The fly has no equal as a germ "carrier"; as many as five hundred million germs have been found in and on the body of a single fly.

It is definitely known that the fly is the "carrier" of the germs of typhoid fever; it is widely believed that it is also the "carrier" of other diseases, including possibly infantile paralysis.

The very presence of a fly is a signal and notification that a housekeeper is uncleanly and inefficient.

Do not wait until the insects begin to pester; anticipate the annoyance.

May and June are the best months to conduct an anti-fly campaign.

The farming and suburban districts provide ideal breeding places, and the new born flies do not remain at their birthplace, but migrate, using railroads and other means of transportation, to towns and cities.

Your friends and members of the family now in the service should be reminded of the danger of the house-fly in camps and cooperate with their superiors for the elimination of this deadly pest.

Kill flies and save lives!

HOW WE GET OUR MILK.

BY H. H. BRYANT, D. V. S., DIVISION OF FOOD INSPECTION.

To furnish milk to the city of Milwaukee requires the efforts of sixty city milk plants, and the operation of over five hundred milk wagons. The milk is produced on approximately three thousand dairy farms, surrounding Milwaukee and extending in some cases sixty miles from the city limits. Milk in Milwaukee is handled by nearly two thousand storekeepers.

To properly supervise and control the milk situation from a health viewpoint is a large problem and requires the constant service of a number of persons both in the field as well as in the laboratories. The Health Department maintains inspectors in the milk shipping districts as well as in the city.

During the month of March, 417 dairy farms were inspected, which resulted in nine being barred from shipping milk to Milwaukee, because of

insanitary conditions. Thirteen farms that had been barred previously, having complied with orders, were allowed to ship again. Herd tests to the number of twenty-five were made. Of milk cans 14,587 were inspected in regard to cleanliness and open seams, which resulted in thirty-eight being condemned as unfit for use. Sediment tests to the number of 1,445 were made which resulted in 4,796 quarts of milk being returned to the producer because of being unfit for food. Temperature tests of 3,798 cans were made and a total number of 1,648 milk samples were collected for examination in regard to butter fat contents. The average fat test of samples taken last month was 3.64 per cent. There were five prosecutions for violation of the law, which resulted in fines aggregating \$164.26.

CLEAN-UP.

Following the custom of other years, Milwaukee will have its annual spring clean-up campaign during the month of May for the purpose of ridding the city of its winter's accumulation of filth and rubbish.

The desirability of such a "house-cleaning" ought to be clear to every one. In proportion as a community will keep itself clean, individually and collectively, and get rid of rubbish, to that degree will it be free from disease and fire hazards.

The work for this year's clean-up campaign is in the hands of the Milwaukee County Council of Defense. This body will be assisted by various

civic organizations which have been interested in the plan.

According to the plans of the committee in charge, the work of cleaning up the city will be inaugurated by an intensive drive during the week of May 13th to 18th.

While the work of collecting and removing rubbish, the flushing of streets, etc., will be undertaken by the Department of Public Works, and many other private and public organizations are pledged to assist in the cleaning up of back yards and vacant lots, the final success of the clean-up will depend upon the cooperation of the public.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

March, 1918.

Annual Death Rate per 1000.....	13.59	Deaths recorded	504
Annual Birth Rate per 1000.....	27.18	Marriages	140
Annual Death Rate, Males.....	7.5	Population of U. S. Census.....	373,857
Annual Birth Rate, Males.....	14.1	Population (Est.) 1917.....	445,000
Death Rate less, Violence.....	12.9	Annual Death Rate, Females.....	6
Annual Birth Rate, Females.....	13	Births recorded	1008
Birth Rate less, Still Born.....	26.6		

BIRTHS.

SEX.	COLOR.	REPORTED BY	BY WARDS.	
Males.....	White.....	Physicians	First	29
Females.....	Colored.....	Midwives	Second	16
		Others	Third	43
			Fourth	34
			Fifth	32
			Sixth	34
			Seventh	24
			Eighth	44
			Ninth	41
			Tenth	22
			Eleventh	62
			Twelfth	31
			Thirteenth	46
			Fourteenth	58
			Fifteenth	8
			Sixteenth	12
			Seventeenth	32
			Eighteenth	23
			Nineteenth	35
			Twentieth	49
			Twenty-first	46
			Twenty-second	50
			Twenty-third	33
			Twenty-fourth	36
			Twenty-fifth	29
			Hospitals	139
			Pairs of twins	16
			Triplets	—
			Illegitimate	31
			Still born	35

NATIVITY OF PARENTS.

	Both	Parents	Father	Mother
Milwaukee	109	32	69	
Wisconsin	259	51	123	
United States	62	81	57	
Germany	25	57	23	
Poland	50	19	4	
Austria	37	14	7	
Bohemia	6	2	—	
Sweden	—	1	1	
Italy	40	5	—	
Roumania	—	3/4	1	
England	—	—	8	
Holland	1	2	1	
Norway	3	4	3	
Slavonia	1	1	—	
Hungary	33	—	2	
Russia	56	8	5	
Canada	—	3	1	
Greece	13	2	1	
Unknown	—	12	2	
Ocean	—	—	—	
Elsewhere	3	7	1	

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	72	62	White	138	138
Youngest	18	16	Colored	2	2
Widowed	8	4	Others	—	—
Divorced	6	5	Total	140	140

NATIVITY.

	Both	Groom	Bride		Both	Groom	Bride
Milwaukee	10	3	8	England	—	—	2
Wisconsin	45	12	20	Holland	—	—	1
United States	6	17	9	Norway	—	—	—
Germany	4	8	4	Slavonia	—	—	—
Poland	—	2	—	Hungary	3	2	1
Austria	3	2	2	Russia	6	2	3
Bohemia	—	—	—	Canada	—	—	—
Sweden	—	2	—	Greece	7	1	—
Italy	1	2	—	Elsewhere	1	—	3
Roumania	—	1	1	Total	140	54	54

AGE.

	Groom	Bride
Under age	14	5
Under 25	53	93
25 to 35	54	30
35 to 45	14	7
45 to 55	4	4
55 to 65	—	1
65 to 75	1	—
Over 75	—	—

RESIDENCE.

	Groom	Bride
Outside State	5	2
Outside City	12	12
Married outside State	10	10

CEREMONY.

By Judges	28
By Justices	10
By Ministers	102

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.
Total Deaths.....	571	479	451	425	336	358	*384	395	386	402	411	504*
Annual Death Rate.....	15.67	13.06	12.3	11.58	9.1	9.76	10.47	10.77	10.52	10.84	11.08	13.59
Cases and Deaths.....	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases	Cases
Typhoid Fever.....	13	4	10	2	1	4	1	4	1	8	1	9
Measles.....	135	10	234	174	1	26	0	118	0	315	1	637
Scarlet Fever.....	441	11	244	102	4	70	0	3	0	197	9	176
Whooping Cough.....	167	10	233	145	3	98	1	43	1	56	0	79
Diphtheria.....	53	1	50	55	7	65	8	55	2	48	9	24
Influenza.....	1	1	0	0	0	0	0	0	0	0	0	0
Small Pox.....	4	0	17	0	0	4	0	25	0	33	0	19
Poliomyelitis.....	0	1	1	0	0	2	1	0	0	2	0	13
Tuberculosis Pulm.....	98	36	90	41	0	85	28	27	35	86	21	71
Cancer.....	25	29	25	26	21	21	7	24	17	0	31	0
Meningitis.....	9	12	10	5	2	2	6	22	3	6	6	13
Apoplexy.....	28	28	10	25	21	21	10	22	18	0	20	25
Org. Heart Disease.....	46	37	53	40	22	22	31	30	24	32	36	34
Bronchitis.....	15	7	10	4	11	11	7	11	5	12	6	6
Pneumonia.....	116	72	39	25	12	4	37	32	44	0	57	88
Diarrrhoea—Under 2.....	21	20	19	6	19	19	20	22	17	0	16	27
Nephritis.....	26	37	25	35	27	27	12	28	28	0	25	24
Congenital Debility.....	31	24	23	36	22	22	21	21	29	0	34	26
Senility.....	5	6	9	7	4	3	7	6	3	0	8	4
Violence.....	35	19	38	43	52	34	31	44	31	0	33	6
Suicide.....	8	4	4	4	13	9	6	8	9	0	21	5
Homicide.....	3	2	2	2	1	1	1	17	0	0	0	4
Under 30 days.....	53	33	39	50	36	30	31	32	48	0	51	54
Between 30 days & 1 year.....	69	54	47	17	32	50	39	43	35	0	42	57
1 to 5 years.....	50	53	30	27	26	31	26	18	31	0	33	57
5 to 60 years.....	248	203	213	191	153	156	164	190	174	0	161	64
Over 60 years.....	151	136	122	140	89	91	124	112	111	0	116	122
Age at Death, all ages.....	35.5	36.5	36.8	39.2	34.5	34.9	45.6	38.5	37.8	0	39.2	36.1
Age at Death over 5 yrs.....	50.5	50.3	48.	51.2	46.5	50.6	59.7	50.5	51.2	0	56.9	54.7
Public Institutions.....	135	109	114	102	89	75	101	108	94	0	87	101

* Rabies 1 death. Anthrax 1 death. * Pallagra 1 death.



HEALTHGRAMS



The Health Department is to a city what the family physician is to the home. When your physician prescribes bitter medicine, you take it; when the Health Department prescribes likewise, you object strenuously.

* * *

You cannot avoid germs, but you can avoid habits that are in partnership with them.

* * *

Many persons diligently and persistently hunt for worry in the weather. They say "it is awful hot," "too cold," "too wet," "too dry," "too windy," "too dusty," too anything; while the chief cause of their discomfort is an unhappy mental make-up, supplemented by a diseased liver and stomach. You accentuate and make conditions worse by speaking ill of the weather and making it an enemy.—*Capt. L. W. Billingsley.*

* * *

Keep your head cool and your heart warm. The one who lets his head get hot and his heart cold is in a bad way.—*Journal of Outdoor Life.*

KEEP A-GOIN'.

If you strike a thorn or rose,
If it hails or if it snows,
Keep a-goin'.
'Tain't no use to sit and whine
When the fish ain't on your line;
Bait your hook and keep on tryin'—
Keep a-goin'.
When the weather kills your crop,
Keep a-goin'.
S'pose you're out o' every dime!
Gettin' broke ain't any crime;

Tell the world you're feeling prime—
Keep a-goin'.
When it looks like all is up,
Keep a-goin'.
Drain the sweetness from the cup,
Keep a-goin'.
See the wild birds on the wing,
Hear the bells that sweetly ring,
When you feel like sighin', sing,
Keep a-goin'.

—*F. L. Stanton.*

EXPERIMENTING.

Mr. Corderlam—Is this the office of Cento's Certain Cure?

Patent Medicine Man—Yes.

"Gimme six bottles for my wife."

"I tried all other remedies without success, eh?"

"No, she ain't ill at all, but I saw in your advertisements where a woman wrote after taking six bottles, 'I am a

different woman!'" — *The Medical Pickwick.*

MAKING IT PLAIN.

"When a person is blind, his hearing is more acute," said the professor, explaining the law of compensation.

"Oi see," said Pat. "Oi often noticed that if a man has one short leg the other is always longer." — *Ladies' Home Journal.*

Clean up Milwaukee!

The best city to live in is a clean city.

Best—because it is healthiest

Best—because it is safest.

Best—because most beautiful.

Cleaniness is the best fire insurance.

Cleaniness is the best life insurance.

For garbage and rubbish collection,
call Complaint Clerk,
Dept. Public Works, Main 3715.

MILWAUKEE HEALTH DEPT.

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M64 b

Bulletin

of the Milwaukee

Health Department

*Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.*

JUNE 1918.

Vol. 8, No. 6.

LEARN WHAT IS
TRUE IN ORDER
TO DO WHAT IS
RIGHT.

—HUXLEY.

Bulletin of the Health Dept., June, 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIDGE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

CHILD WELFARE DIVISION.

Telephone, Main 3715.

Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M.

Saturday afternoons and Sundays, Closed.

The division handles matters relating to the physical welfare of children under two years of age and to the physical welfare of mothers and prospective mothers. Its nurses give instructions in the care of infants, but are "visiting nurses" only—they do not undertake bedside nursing or assist either during or after confinement except in an advisory way.

The division also arranges for the care of illegitimate children; supervises midwives; supervises day nurseries; supervises so-called Baby Farms; supervises Lying-in-Hospitals and Maternity Homes; conducts mothers' classes and conducts "Little Mothers'" classes for girls.

CHILD WELFARE STATIONS.

Weil St. School, Cor. Weil & Lee Sts.
Lincoln Home, 601—9th St.
Forest Home Ave., cor. 10th Ave.
3rd Ward Barracks, Detroit & Jackson Sts.

St. Casimir's School, cor. Bremer & Clarke Sts.
5th Ave., cor. Hayes Ave.
St. Mark's Church, 4th & Court Sts.

During the summer months, an Infants' Fresh Air Pavilion is operated at Waterworks Park.

Visiting Hours, 2 to 4 P. M.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

JUNE, 1918

DON'T WASTE THE WASTE.

By GEORGE C. RUHLAND, M. D., Commissioner of Health.

Food economy does not mean merely eating less food. Nor is it fully practiced through conserving food by canning or other form of storage.

Proper food economy means all this and more. True food economy includes also the avoidance of waste food that is thrown away in the form of garbage.

It has been said that Europe could live on what America wastes. There is without a question a great deal of truth in this charge.

As a nation we have been wasteful of food, not only eating more than we need for the proper nourishment of our body, but also wasteful in throwing away perfectly good food that might serve to nourish others or that might at least be utilized in such a manner that it would represent a gain instead of a loss.

We are too apt to regard what has not been used up for a meal as of no further value. It becomes garbage and with that is dismissed as something of no value.

It might help us to a better understanding of food economy to realize that one ton of ordinary garbage can be made to yield sufficient glycerine for the explosive charge of fourteen 75 mm shells; sufficient "fatty acid" for the manufacture of one hundred 12-oz. cakes of soap; sufficient fertilizer elements to grow eight bushels of wheat and scores of other materials valuable in munition making. If used as hog feed it will produce one hundred pounds of good, firm, first quality pork.

These facts tell a rather startling story and undoubtedly are a surprise to most of us who have never given this matter a thought.

The thing that matters, however, is to get the lesson; to appreciate the importance of these facts and to begin practicing those economies that we obviously should practice.

True food economy is not in stinting and starving, but in avoiding waste. There will be sufficient food for all if we will learn to use it properly.

You can "do your bit" by keeping yourself fit.

HOW TO KEEP YOUR BABY WELL.

By G. H. FELLMAN, M. D.

It is a well-known fact that more infants die during the first year than at any other period of childhood. This is as true of Milwaukee as of any other city or state in the Union. In our own city, 1,104 deaths occurred in 1917 in infants under one year. The plan of the U. S. Children's Bureau is to save 100,000 babies in 1918, but unless every state in the Union makes sincere efforts to save its proportion of infants this campaign shall surely fail.

No problem can be solved without a knowledge of their causative factors and as we study the prevention of infant mortality we soon realize that a host of causes are producing the high mortality amongst our infant population.

A noted writer once made the statement that, "the training of a child began with its grandparents." It is equally true that the health of the baby is dependent to a great extent upon its progenitors. A previous article in the last bulletin presented in a very instructive manner the prenatal and natal causes of infant mortality. We shall, therefore, omit further reference to this important factor and proceed to mention the other factors that cause the infant to die when it has once arrived to cheer the heart of the parents by its presence.

First and foremost amongst the causes I should place the proper feeding of the infant, for upon it are dependent the resistance of the infant

to the inroads of other causes that may terminate the young life.

Nature has wisely designed the best method of feeding its offspring and woe to those who through ignorance or selfish desires attempt to substitute other methods. The breast milk of a mother, if properly nourished, will in almost all cases supply all the food requirements of the infant and every mother should be sincere in her efforts to nurse her baby and under no circumstances substitute the artificial or "bottle feeding" until she has consulted the best possible advice as to the correction of her own milk supply, where the same seems to be deficient or to disagree with her infant. She should hesitate to accept the advice of her family physician, if the latter lightly suggests to try this or that substitute for the breast milk simply because her baby suffers from cholic and is restless or even refuses to gain promptly. There are methods which every true physician will suggest her to try to improve her own milk supply before placing the baby on the bottle.

The child receiving the human milk is far more resistant to the infectious diseases and their complications which so often affect the respiratory organs and thus prove fatal. It is rarely affected by the severe forms of gastro-enteric diseases which is another potent cause of the high mortality in the infant. Should, in spite of all efforts to the contrary, it be found impossible for the mother to

nurse her baby, then it is essential to seek the advice of the physician to guide her in the proper way of modifying cow's milk to suit her infant's needs. The well-meaning advice of a neighbor or a friend whose babies thrived on a certain method of feeding, even though that method may have been suggested by a prominent physician, may not suit her child's requirements at all, for the saying, "what is one man's food is another man's poison," is equally applicable to babies, for they, like adults, are a law unto themselves and need individual attention when attempting to feed them. Nor is it sufficient after once having received the proper suggestion, to imagine that this is sufficient for week and months to come, as the babies' requirements will vary from time to time. Inability to pay for proper advice need not deter the mother in her efforts to obtain help, for in all large cities and also in a great many smaller ones, the various free dispensaries and the child welfare bureaus see to it, through the aid of the visiting nurse and social service worker, to supply their needs gratis to those deserving the same.

Another potent factor, besides the above, causing our high mortality amongst infants, are the respiratory diseases such as severe bronchitis, broncho-pneumonia and pneumonia. These are often the result of neglecting the primary "cold." Every possible effort should be made to protect the baby from contracting a "cold" from others suffering from "colds," as the latter are more frequently distributed by contact than mere exposure to draughts.

So many babies have died from diarrhoeal diseases that it formerly ranked as the most frequent cause of our high mortality amongst infants under two years. The rigid inspection of our water and milk supply has greatly lessened the same; but no matter how well the Health Department may inspect the milk or the distributors pasteurize the same, they cannot prevent its contamination through careless handling after it reaches the consumer. It is, therefore, essential to the babies' welfare to keep the milk clean and cool, for if permitted to stand in a warm room it soon becomes a source of danger to the baby, as the germs present in all milk rapidly increase under such conditions.

Never permit a diarrhoea to go untreated under the supposition that it is merely due to teething. Many a baby has died because parents have permitted a child to become hopelessly ill before calling a physician, under the delusion that the child was simply teething.

All our efforts to keep our baby free from the above mentioned diseases will be futile if we neglect proper cleanliness, rest and fresh air, for the baby will only thrive best, as do the flowers, in the presence of the blessed sunshine and abundance of pure air.

Therefore, to give your little one the best possible chance of living, see that it is properly cared for before its arrival and not harmed through ignorance or neglect when it has once started out on its life journey.

Most illness is due to negligence or ignorance.

MENTAL OVERWORK.

By J. W. COURTNEY, M. D.

Physiologists have shown that intellectual activity is always accompanied by a marked increase in the amount of blood contained in the vessels of the brain. This being so, we should refrain from bringing about this condition at a time when the blood thus attracted to the brain is urgently needed for the proper functional activity of the bodily processes, notably digestion. As an example of what often results from an infraction of this rule we have need only to look to the large number of cases of stomach and intestinal indigestion in brain-workers who persist in pursuing their intellectual avocations immediately after eating. It is obvious then that intellectual and digestive processes cannot, with any degree of comfort, be called into play at the same time.

The morning seems to be the time when the brain, after the repair occasioned by a night's rest, possesses the most "verve," and it is then that the bulk of intellectual performance should take place. Almost from the beginning of the day the process of running down goes on, and this running-down process seems to reach its maximum at about four o'clock in the afternoon. It is at this hour certainly that the vitality of the nervously weak often reaches its lowest ebb. There is, however, a subsequent increase in vigor, which is derived from taking the evening's meal, but the blood-supply to the brain has already begun to be influenced by the

waste products of the active cells. These waste products ultimately accumulate faster than they are removed, render cerebral activity more and more difficult, and finally suppress it to such a degree that sleep intervenes.

This is the way, then, that Nature, if left to herself, would regulate the matter of waste and repair, and it would certainly be of great benefit to brain-workers if they took the hint from her and arranged their periods of mental activity and rest accordingly, even though they did so only to the extent of getting that portion of their brain-rest which is comprised in sleep, during the hours between ten o'clock at night and eight in the morning. With all due respect to opinions to the contrary, the brain-worker requires more sleep than the laboring-man, and he is certainly doing himself an injustice, against which his nervous system will sooner or later rebel, if he attempts to get along with less than eight hours.

Every now and then we are treated to an article in some popular magazine which informs us that some favorite author carries on his work at hours, and on the strength of an amount of sleep, which set all the laws of Nature at defiance. Whether this performance is exploited with the idea of stimulating the ambitious young man or woman to do likewise or not, is not known, but it certainly does not take much critical acumen to detect in the work of such an author

positive evidence of a lack of sustained effort which is greater than can be accounted for on ordinary grounds. At all events the world would be far better off if it were spared much of the material which comes to us in the guise of literature, but is in reality the product of the same sort of cerebration that produces bad dreams and nightmare. Occasionally great thoughts will insist on forcing their way into the conscious-

ness during the dead of night, but these occasions are, on the whole, so rare that we may with safety incur the brief loss of sleep which the recording of them on paper entails. Unfortunate examples of the effects of intellectual employment during the normal sleeping-hours are the cases of neurasthenia in editors and reporters employed on morning newspapers.

WHEAT SUBSTITUTES.

The Health Department has received numerous inquiries with regard to the wheat substitutes recommended by the government as a war measure. Fear has been expressed that these substitutes would react disadvantageously upon the health of the consumer. The Milwaukee Health Department has been using war breads exclusively in its hospitals and sanatoria since the order of the government was first issued, and no untoward results have been observed among any of the patients.

The experiences of the allied nations with war bread, covering even a longer period, are similar. The British war bread, which is decidedly more of a war bread than anything we yet know of in the United States, has been endorsed as a food by a committee of British scientists. After a series of tests the committee finds that bread composed of whole wheat flour mixed with 20 per cent of other flours, is not only suited to all ages and digestions, but also gives a higher percentage of energy. A group of 20

men, nine women, and two children in one factory ate this bread exclusively for two months and were under medical supervision at that time. In no case did it cause digestive trouble, and in certain instances the health seemed to improve during its use. Mixed bread was also fed to 25 patients suffering with tuberculosis, and it was found that most of them preferred it to the ordinary wheat bread. Although all of them had more or less impaired digestions, most of the patients gained in weight.

A report says "the human body can make better use of the breads of the wheat grain, which have hitherto been discarded, than the pigs and poultry to which this rich and nutritious by-product of milling has been given in the past. The country has gained enormously in food and energy from the compulsory inclusions in the loaves of these by-products." The committee estimates that the gain is sufficient to extend the world's supply of energy for more than a month in a year.

The best health insurance is keeping yourself informed how to stay well.

HEALTH VS. EDUCATION.

By JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

It is a well-known fact that each individual is inclined to consider his particular work the most important and most necessary.

The teacher of Græek cannot understand how any student can make a success of life without a fair knowledge of Greek. The teachers of mathematics, physics, philosophy, astronomy and languages are of the same opinion with regard to their specialty.

The surgeon sees nothing but surgery, the Christian Scientist considers his treatment a panacea for all disease, the vegetarian is certain that he has the only right idea of living, and so we could go on indefinitely to show how every one is so absorbed in his particular work that he can see nothing else.

The writer hopes that he will not be accused of such partiality by the readers of this article, for his intention is to remain neutral.

Although a public health officer, yet he has been through enough schools, both as a student and a teacher, to realize the value of education.

We will agree that education is something very much desired and almost necessary for the enjoyment of life, but we will not admit that it is the most desired or the most necessary.

No normal individual would prefer education to health.

We will all agree that there is nothing worse in this life than ill-health while uneducated people may be very happy and successful in life.

When there can be no question as to which is the most desirable in life, health or education, we have wondered many times why it is that millions are spent by cities and states for education and only hundreds or at the most thousands are spent for health.

Educational work is carried on in beautiful, spacious buildings, health work is crowded into basements and other undesirable quarters.

A request for a million dollars for a new school is granted with a smile; a request for a few thousand to properly house a health department would be frowned upon.

Public sentiment has so been shaped by educators that any public official opposing appropriations for educational purposes is considered inimical to the very principles for which our ancestors fought, while one who votes money for health work is apt to be accused of extravagance.

When the Health Department excludes a child from school for a week or two because it is a menace to the health of other children, we are often criticized because someone considers a few days loss from school more of a calamity than if several other children contracted what might be a fatal disease.

A few years from now it will make very little difference whether a child was absent from school for a day or a month, but it will make a big difference if in order to keep one child in school the life of another was sacrificed. Many teachers cannot

understand why a child should be excused from school for a few hours to go to the school dentist. They seem to feel that the future of the child is more dependent upon about two hours of school work than on well-preserved teeth.

A few years from now when the grown-up child consults the physician for rheumatism or stomach trouble, the question will not be, "How many special merit marks did you receive or how many years did you attend school without being neither absent nor tardy," but about the first question will be, "Have you bad teeth?" Then woe unto you teachers and parents who sacrificed the child's teeth for a perfect school attendance record.

When the Health Department physician or nurse calls at the school to examine individual pupils or entire class rooms, they are many times made to feel that they are disturbing

the most important work in the world, by such an unimportant thing as looking after the health of the children.

Loss of time? Why, every school in the country could devote one entire day each week to health work and not lose time but gain time. You may gain a few minutes in school work on a certain day by refusing to send a pupil to the doctor or nurse, but those few minutes saved on that day will probably be years lost in after life. There is only one way to save time, and that is to take time for health work.

"A stitch in time will save nine" is as true as it is old, when it comes to the question of health. Education? We most assuredly believe in it; but we don't believe in making a "golden calf" out of it and worshipping it. We are willing to have education be the older brother and entitled to the birthright, but we don't want health treated like a step-child.

REGULAR HABITS.

Regular habits for retiring must be considered as one of the best methods for securing good sleep.

The human body has a wonderful periodicity in all its spontaneous actions, and by studying these much of the machinery of health may be made to work smoothly.

Witness one habit of waking at a certain hour to which we have been accustomed.

Regularity in eating is most important for health. The digestive system will respond at regular times just as other habits will repeat themselves.

Proper food properly digested will do much for one's health and happiness.

It is a mistake to eat too much.

We should try and enjoy our meals by paying attention to the taste of food. Do not gulp it down. It should be masticated and tasted so as to stimulate those nerves which reflect their sense on the other nerves controlling the glands of digestion.

When you feel indigestion after eating a meal, note the ingredients eaten, and should it repeat itself, try to convict the guilty food and dismiss it from your dietary.

Don't make eating a task but make it a pleasure, so that the food will digest and be assimilated and applied to the different necessities of the activities of life.

Youth demands a greater variety and quantity of food than does old age, and especially does it require more protein and meat.

Learning what foodstuffs best suit is one of the great educational tasks man has before him, for he no longer

has the intuition of the lower animals. The latter seem to inherit a sense that directs them what is best for their body wants. The vast majority of animals can differentiate between the poisonous and non-poisonous foodstuffs.—*Exchange*.

FIRST AID TO THE INJURED.

Insect-stings belong to the class called poisoned wounds. They are seldom dangerous, although for a time quite painful. Careful examination may show the sting of the insect still in the wound. It should be pulled out with tweezers, and water of ammonia or spirits of camphor applied. A cold-water dressing may then be employed to prevent swelling.

Mosquito-bites are often a source of great annoyance and disfigurement. The annoying itching may be allayed by touching the bites with carbolized oil, ammonia, or spirits of camphor, or with a cooling evaporating lotion. Dampened salt rubbed on the spot is sometimes useful.

Dog-bites or the bites of other animals, as the cat or rat, are sometimes productive of severe inflammation, and even of decided illness. Hydrophobia, although rare, is perhaps the most serious complication to be feared. A dog which has bitten any one should on no account be killed until it has been kept long enough to determine whether or not it was mad. To find that the animal was not rabid will be a great relief to all concerned. Wounds produced by the bite of an animal should be pressed out thoroughly to encourage bleeding, and should if possible be disinfected by

the application of tincture of iodine. All dog bites should be reported to the Department of Health, giving the name and address of the owner of the dog, so that proper supervision may be established to determine whether the animal was rabid or not, and proper treatment may be instituted.

Snake-bites constitute a variety of poisoned wounds fortunately not often met with in this part of the world. If the snake was a venomous one, a cord should at once be tied around the limb above the wound to stop the progress of the blood and to keep the poison out of the general circulation. The wound should be squeezed out under water, or may be sucked thoroughly, provided the lips of the person who does this are quite free from cracks. Medical assistance should be summoned at once, and the wound ought to be cut out or cauterized, as in the case of dog-bites. Stimulants in large quantity have been recommended, and are perhaps of service. A solution of permanganate of potash of the strength of 20 grains to the ounce should be used to wash the wound.

Ivy-poisoning. The intolerable itching may be relieved by plain water, baking-soda and water, lime-water and lead water.

WARM WEATHER CLOTHING.

By GEO. C. RUHLAND, M. D.

Health, body comfort, and working efficiency, depend to a large extent upon the clothing we wear.

Obviously our comfort and need, therefore, will be best served if we adapt our clothes to suit the particular climatic, temperature and working conditions under which we must wear them.

While there are some who as a fad and for other reasons insist that the same weight in clothes should be worn the year around, for normal people a rational seasonal adjustment of clothing is best.

This means in general terms, warm clothes for winter, and fewer and cooler clothes for summer.

There are certain fundamentals that should be well understood and observed in selecting clothes for summer wear. The warmth of clothes depends not so much upon the nature of the fabric as upon the manner in which it is woven. To illustrate, woolen garments are warm not so much because of the wool as because of the many minute air spaces which the loosely woven texture contains and in which the warm air is retained.

The fewer of such air spaces a garment contains, or the more compact and smooth its texture, the less will it have the heat retaining property. Such materials are silk, linen, and cotton. They, therefore, are the ideal material for summer garments.

Cotton, because it is strong, durable, cheap, does not shrink readily, and absorbs odors very slightly, is for all

practical purposes the most desirable material to be used, especially for undergarments.

Needless to say, it is very important that all underclothing should be washed frequently, particularly so when the wearer perspires freely. Unless this precaution is well observed and combined with frequent bathing, skin diseases are very likely to develop.

The use of light woolens for undergarments even in summer may be indicated where the body heat producing power is much reduced as in invalids and in the aged. Also those who are exposed to rapid changes in temperature may do well in wearing woolens in place of cotton, for the reason that a woolen garment has the property of absorbing a great deal of moisture without feeling wet. Evaporating of moisture proceeds slowly from woolens, while cottons speedily become saturated with moisture and evaporation is likely to take place suddenly with resulting chilling of the body.

The color of garments is also an important consideration in the selection of summer clothes. The dark shades, as is well known, absorb more of the sun's rays and are, therefore, much warmer than those of a light color. The latter, therefore, are to be preferred.

Shoes and stockings are yet another essential item in our wearing apparel that should be given special consideration.

There is hardly an article of clothing upon which our comfort depends so largely as upon the covering of the feet, yet the feet are, without a doubt, the most generally abused members of our body.

Much lost energy could be saved, much irritability and nervousness avoided, many a backache cured and ill-health prevented, not to speak of corns, bunions, broken down arches, and other essential foot troubles, if feet were more properly shod.

Shoes, to be comfortable, should be of pliable leather, measure at least three-fourths of an inch longer than

the foot, should be wide enough at the toes to allow them to spread, should have broad low heels, and preferably be cut low to admit of free action of the ankle and give better foot ventilation.

Socks and stockings should likewise be made to fit comfortably. A sock or stocking that is too short in the foot or tight fitting may be almost as troublesome as a poorly fitted shoe.

Frequent changes of socks and frequent foot baths will aid greatly in keeping the feet and the entire body in a comfortable and fit condition.

Diseases of the Teeth May Cause Death.

That deaths may be caused by diseases of the teeth is shown in a statement just issued by the Metropolitan Life Insurance Company. During 1917 fifty-two deaths which were traceable to infections of the teeth and gums occurred among its industrial policy-holders.

Diseases of the teeth cause death through the complications which set in. The tooth troubles in these fatal cases led to blood poisoning, inflammation of the membranes of the brain, inflammation of the middle ear, decay of the bones of the jaw and head, and even inflammation of the lining of the heart, as well as serious derangement of the digestive system.

Of the fifty-two deaths, seventeen, or nearly a third, were of children under fifteen years of age. Twenty-one were of those between fifteen and forty-five, ten between forty-five and sixty-five, while the remaining four were among policy-holders over sixty-five years of age. The condition is, therefore, especially worthy of atten-

tion among school children, even the very young ones.

Infection at the ends of the roots of the teeth, so-called "blind abscesses," ulcerations, and pyorrhea, or Riggs' disease were among the conditions reported in these fatal cases.

Most of these deaths were probably preventable. If it were possible to obtain the full history of these cases it would probably be found that lack of proper care of the teeth was the real cause of all of them.

Although deaths due to dental diseases are not an important factor numerically in the mortality of the country, they have come to be recognized as worthy of more attention. By announcing that fifty-two deaths were actually caused by these preventable diseases in a single year, it is hoped to emphasize the fact that these conditions may be fatal, as well as to impress on the public mind the vital importance of proper care of the teeth.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, *Deputy Registrar.*

April—May, 1918.

Annual Death Rate per 1000.....	14.8	Population of U. S. Census.....	373,857
Annual Birth Rate per 1000.....	28.4	Population (Est.) 1917.....	445,000
Annual Death Rate, Males.....	8.2	Annual Death Rate, Females.....	6.1
Annual Birth Rate, Males.....	14.2	Annual Birth Rate, Females.....	14.2
Death Rate less, Violence.....	14.1	Birth Rate less, Still Born.....	27.7

Deaths recorded	1103	Births recorded	2107
Marriages	587		

BIRTHS.

SEX.		COLOR.		BY WARDS.	
Males.....	1054	White.....	2105	First	54
Females.....	1053	Colored.....	2	Second	67
REPORTED BY				Third	80
Physicians	1582			Fourth	39
Midwives	487			Fifth	64
Others	38			Sixth	70
NATIVITY OF PARENTS.				Seventh	64
Both				Eighth	133
Parents Father Mother				Ninth	74
Milwaukee	173	76	147	Tenth	63
Wisconsin	528	148	270	Eleventh	77
United States	141	140	136	Twelfth	75
Germany	75	109	71	Thirteenth	79
Poland	117	52	13	Fourteenth	143
Austria	78	29	20	Fifteenth	34
Bohemia	9	5	3	Sixteenth	37
Sweden	1	—	—	Seventeenth	97
Italy	70	11	—	Eighteenth	45
Roumania	1	1	2	Nineteenth	38
England	2	9	5	Twentieth	87
Holland	1	2	—	Twenty-first	104
Norway	3	4	4	Twenty-second	80
Slavonia	6	—	1	Twenty-third	55
Hungary	51	5	1	Twenty-fourth	100
Russia	120	44	12	Twenty-fifth	57
Canada	—	10	4	Hospitals	304
Greece	20	7	—	Pairs of twins	26
Unknown	—	32	—	Triplets	—
Ocean	—	—	—	Illegitimate	55
Elsewhere	10	25	12	Still born	56

MARRIAGES REGISTERED.

Groom Bride		Groom Bride	
Oldest	66	White	486
Youngest	18	Colored	1
Widowed	48	Others	—
Divorced	32	Total	487

NATIVITY.

Both Groom Bride			Both Groom Bride		
Milwaukee	62	17 32	England	—	2 4
Wisconsin	211	51 85	Holland	—	—
United States	18	61 43	Norway	—	2 2
Germany	12	31 16	Slavonia	—	—
Poland	12	6 2	Hungary	13	2 4
Austria	14	8 13	Russia	24	15 4
Bohemia	2	—	Canada	1	1 2
Sweden	—	3 —	Greece	—	9 —
Italy	5	6 2	Elsewhere	—	3 2
Roumania	—	—	Total	276	211 211

AGE.

Groom Bride	
Under age	49
Under 25	223
25 to 35	219
35 to 45	66
45 to 55	19
55 to 65	10
65 to 75	1
Over 75	—

RESIDENCE.

Groom Bride	
Outside State	35
Outside City	50
Married outside State	30

CEREMONY.

By Judges	66
By Justices	27
By Ministers	494

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May
Total Deaths.....	451	425	336	358	*384	395	386	402	411	504*	639	464
Annual Death Rate.....	12.3	11.58	9.1	9.76	10.47	10.77	10.52	10.84	11.08	13.59	14.53	12.51
Cases and Deaths.....	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Typhoid Fever.....	8	3	2	1	4	1	5	1	9	2	23	9
Measles.....	337	1	4	0	118	0	255	0	137	10	1616	18
Scarlet Fever.....	244	8	174	3	140	3	188	9	162	15	1457	15
Whooping Cough.....	175	9	145	2	143	1	38	1	176	5	91	6
Diphtheria.....	66	9	55	10	55	8	52	2	59	1	184	3
Influenza.....	0	0	0	0	0	0	0	0	3	3	33	3
Small Pox.....	23	0	0	0	0	0	0	0	24	2	0	0
Poliomyelitis.....	1	0	0	0	25	0	22	0	0	0	14	1
Tuberculosis Pulm.....	103	32	90	38	53	22	68	86	71	15	23	48
Cancer.....	25	25	21	28	40	17	0	31	22	28	38	22
Meningitis.....	5	5	2	7	6	4	3	6	6	13	13	15
Apoplexy.....	25	25	21	14	10	22	18	16	20	25	24	20
Org. Heart Disease.....	53	53	40	22	31	30	24	32	36	34	42	34
Bronchitis.....	10	10	4	24	7	11	5	0	6	12	17	18
Pneumonia.....	39	25	12	26	37	32	44	57	51	88	70	73
Diarrhoea.....	19	35	19	35	20	22	17	0	27	20	19	19
Nephritis.....	25	35	27	12	17	28	28	25	25	24	36	26
Congenital Debility.....	23	35	22	20	21	21	29	32	34	26	23	26
Senility.....	9	7	4	3	7	6	3	0	6	8	8	9
Violence.....	38	43	52	34	31	44	31	21	33	24	29	23
Suicide.....	5	4	13	9	6	8	9	0	6	5	6	7
Homicide.....	2	2	1	3	1	17	0	0	3	0	1	2
Under 30 days.....	39	50	36	30	31	32	48	50	51	54	46	46
Between 30 days & 1 year.....	47	17	32	50	39	43	38	42	57	57	69	56
1 to 5 years.....	30	27	26	31	26	31	18	33	31	64	69	52
5 to 60 years.....	213	191	133	166	164	190	174	161	150	201	309	178
Over 60 years.....	122	140	89	91	124	112	111	116	122	125	146	132
Age at Death, all ages.....	36.8	39.2	34.5	34.9	45.6	38.5	37.8	39.2	36.1	32.5	34.7	34.4
Age at Death over 5 yrs.....	48.	51.2	46.5	50.6	59.7	50.5	51.2	56.9	54.7	49.	49.	50.1
Public Institutions.....	114	102	89	75	101	108	94	87	88	101	139	98

* Rabies 1 death. Anthrax 1 death. * Pallagra 1 death.



HEALTHGRAMS



Hate, malice, envy, anger and peevishness are rank poisons and if given free play will poison your blood, poison your food, poison your efforts, bring you failure in business, lose your friends, blight your hopes, impair your energies and greatly shorten your life.—*Capt. L. W. Billingsley.*

A gentleman once advertised for a coachman. Of each applicant he asked this question: "How near to a precipice would you drive without going over?" One said, "Within a yard," and another, "Within a foot," etc., but one answered, "I would keep as far from it as possible." He got the job. Disease is the precipice, keep away from it!

The human race is divided into two classes: Those who go ahead and do something, and those who sit and ask, "Why wasn't it done the other way?"—*Holmes.*

Philosophy is a first-rate thing to have, but you can't alleviate the gout with it, unless the gout happens to be on some other fellow.—*Josh Billings.*

THE VERDICT WAS "GUILTY"

A country lawyer was defending a prisoner who had killed a man by hitting him on the head with a brick. The case against the prisoner being quite clear, the counsel endeavored to get his client off by making a per-fervid speech. He said: "The responsibility of defending my client is almost overwhelming. This morning, as I was walking in my garden enjoying the lovely sunshine and balmy air, listening to the birds singing, and

looking at all the beautiful flowers, I said to myself, 'My poor client, immured in his cell, can see none of these things!'"

Just then a spectator at the back of the court shouted: "Neither can the man he hit on the head with a brick!"

BOOST A BIT.

Here! you discontented knocker,
Growlin' 'bout the country's ills;
Chloroform yer dismal talker;
Take a course o' liver-pills.
Stop yer dum ki-o-tee howlin',
Chaw some sand an' git some grit;
Don't sit in the dumps a-growlin',
Jump the roost
An' boost
A bit!

Fall in while the band's a-playing',
Ketch the step an' march along—
'Stead o' pessimistic brayin',
Jine the hallelujah song!
Drop yer hammer—do some rootin'—
Grab a horn, you cuss, and split
Every ecno with yer tootin'—
Jump the roost
An' boost
A bit! —*Backbone.*

THE DIFFERENCE IN THE SEXES.

Young Johnny had been reading the evening paper, and paused contemplatively for a few moments. "Father," said he, "what is 'inertia'?"

"Well," replied the father, "if I have it, it's pure laziness; but if your mother has it, it is nervous prostration."—*Tit-Bits.*

DON'T WASTE THE WASTE

TRUE FOOD ECONOMY
IS NOT IN STINTING
AND STARVING, BUT
IN AVOIDING WASTE.



MILWAUKEE HEALTH DEPT.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

JULY 1918.

Vol. 8, No. 7.

*"Next to the duty of doing every-
thing possible for the soldiers at the
front, there could be, it seems to me,
no more patriotic duty than that of
protecting the children.*

—PRESIDENT WILSON.

Bulletin of the Health Dept., June, 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIDGE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is
Main 3715.

Do not ask merely, for the "Health
Department"—get the proper person
or division. If uncertain, tell the
operator, briefly, what your call is
about, or ask for the Chief Clerk.

The following offices are located on
the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Elghth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12
M. 1:30 P. M. to 5 P. M. Saturday
afternoons and Sundays, Closed.

Engagements with the Commis-
sioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

CHILD WELFARE DIVISION.

Telephone, Main 3715.

Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M.

Saturday afternoons and Sundays, Closed.

The division handles matters relating to the physical welfare of children
under two years of age and to the physical welfare of mothers and prospec-
tive mothers. Its nurses give instructions in the care of infants, but are
"visiting nurses" only—they do not undertake bedside nursing or assist either
during or after confinement except in an advisory way.

The division also arranges for the care of illegitimate children; super-
vises midwives; supervises day nurseries; supervises so-called Baby Farms;
supervises Lying-in-Hospitals and Maternity Homes; conducts mothers' clas-
ses and conducts "Little Mothers'" classes for girls.

CHILD WELFARE STATIONS.

Weil St. School, Cor. Weil & Lee Sts.
Lincoln Home, 601—9th St.
Forest Home Ave., cor. 10th Ave.
3rd Ward Barracks, Detroit & Jack-
son Sts.

St. Casimir's School, cor. Bremen &
Clarke Sts.
5th Ave., cor. Hayes Ave.
St. Mark's Church, 4th & Court Sts.

During the summer months, an Infants' Fresh Air Pavilion is operated
at Waterworks Park.

Visiting Hours, 2 to 4 P. M.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

JULY, 1918

SUMMER VACATIONS.

By GEO. C. RUHLAND, M. D., Commissioner of Health.

This is the time of vacations and outings. A vacation, as that sage from East Aurora, the late Mr. Elbert Hubbard, once said, is a good thing because it will give the employer a chance to realize how valuable are the services of his employe, and in turn demonstrates to the employe that his employer's business really can get along without the employe's valuable assistance. The net result, therefore, is, or at least should be, a wholesome improvement in the mutual respect and appreciation between employer and employe.

Aside from these very desirable, though we fear likely somewhat remote ethical by-effects to a vacation, there are other intrinsic merits that make a vacation worth while. "All work and no play" notoriously makes for dullness, and dullness is bad for business as it is for social life. To get away from the routine grind of business, especially if this means getting to where there is a complete change of surroundings, is eminently a good thing. It clears the mind of weeds and helps to correct mental myopia that comes from too close and too long application to work. To get out and hold communion with nature,

to bask in the sunshine, to play, to be a child again, indeed is an excellent remedy and antidote against staleness as well as real physical and mental deterioration.

But even in taking a vacation it seems necessary that advice must be given in order that it may benefit as it should. As a nation we are notoriously enthusiasts and are apt to go to extremes, in business as well as in play. The vacationist frequently will plunge into his vacation and work harder at his vacation than he does at gaining his livelihood with the consequence that instead of finding the expected and necessary rest and recuperation, he will return to the city and to his work more spent and fatigued than he left it.

To exercise in the open, to walk, to roam through field, through forest, to swim in cool refreshing waters, are all excellent exercises. It is a mistake, however, to try to crowd into the space of two weeks all the muscular effort that should be spread over an entire year. Too many believe that having a good time for a vacation means playing the savage when they get into the open. They forget that for the savage the open

is the natural environment to which they cannot in two weeks become adapted. A bronzed skin and coat of tan are considered the proper evidence of having had a vacation. A healthy tan is entirely desirable; too many, however, gather merely a bad sunburn for the tan which they tried to acquire in a hurry.

The moral that we wish to point out is that for the vast majority a vacation will serve its purpose best if rest will be its chief aim. Rest—absolute rest—will prove of more real benefit than will a strenuous two weeks at playing the primitive man at high speed. Moderation in all things.

WHOOPIING-COUGH.

The Health Department desires at this time to call the attention of the public to the fact that the number of whooping-cough cases has gradually increased, so that there are at the present writing over three hundred active cases recorded.

Whooping-cough is a dangerous but avoidable disease of childhood. The younger the child the more severe the attack and therefore the more dangerous.

It is one of the few contagious diseases that is on the increase during the summer months. The reason for this increase, no doubt, is due to the fact that children with whooping-cough are permitted to be on the sidewalks and streets with other children, while during cold weather they are kept in the house.

When the family physician advises fresh air as a part of the treatment he assumes that you will avoid contact with other children. The patient should be kept under close supervision and not be permitted to leave the porch or yard. When two or more families have a yard in

common, the well children have the first right to the use of the yard and the children with whooping-cough must be kept away from them.

People who deliberately break quarantine or avoid quarantine by not having their cases reported and take their children, who have whooping-cough, on street cars, to church, to picture shows or other public places of amusement, are guilty of a serious offense by causing unnecessary sickness and in some instances, death.

The best way in which the public can assist in checking whooping-cough is by keeping children with a cough away from other children, whether this cough is whooping-cough or some other cough.

Where there is no question about the diagnosis, every case should be reported to the Health Department, and where parents neglect to properly isolate the patients, thereby jeopardizing the lives of other children, neighbors with the assistance of the Health Department, ought to see to it that this criminal practice is stopped.

Why call the fire-department when you see a little smoke in the basement and neglect to call a doctor when your child is burning up with a fever?

THE HYGIENE OF INFANCY.

By WALTER L. PYLE, A. M., M. D.

A normal infant should be strong, healthy, happy, and attractive. If it is not, the cause is commonly ignorance or carelessness. The care of babies is often left to prejudice and precedent, whereas it should be the application of common sense combined with a knowledge of the best scientific methods of rearing infants.

THE NURSERY.

The nursery should be of good size, bright, sunny, airy, above the first floor, dry, with preferably southern exposure, and with more than one window. For each occupant of the room there should be from 500 to 1,000 cc. of air space. Pure outdoor air at all times in abundance, but without draughts, is of supreme importance. If the baby can live or sleep out of doors, so much the better.

The nursery should be thrown wide open once or twice a day; the bed-clothes, mattress, rubber cloth, and entire room thoroughly aired and sunned for at least two hours during the child's absence. All should be well warmed again before its return. The room and bed-clothes must be kept sweet and clean. For several hours twice a week the bed-clothes should be hung out of doors. The temperature of the room should be kept uniform—about 68°-70° F. A thermometer or two should be placed where there is a mean temperature—too close to the windows nor too near the heating apparatus; nor should it be hung near the floor, since the air is cooler there.

The furnishings should be plain

and easily cleaned. Dust-catching draperies are undesirable. Wash materials should be used for curtains and screens. Painted floors and hardwood and rugs are preferable to carpet. Each day the room should be dusted with a damp cloth, and once a week the floor should be wiped and the rugs taken up.

The windows should have dark shades, for the baby is very susceptible to light. In summer, screens are necessary at the windows to keep out flies and mosquitoes, by means of which contagious diseases are often transmitted to the baby.

No cooking should be done in the room. No diapers or clothing should ever be dried in it. Soiled diapers and vessels containing bowel-movements or urine should be removed at once. No food or empty dishes or nursing bottles should be permitted to stand about. Tobacco-smoking should not be allowed.

The best bed for the baby is a brass or white enameled iron crib. It should be so placed that the light will not fall directly in the child's eyes, and not between windows or doors.

A tall screen is useful in cutting off light and draught. The mattress should be of hair, for feathers are too warm. If a pillow is used, it should be of hair. Babies accustomed to sleep on their stomachs have sometimes been suffocated by a feather pillow. Rubber sheeting or water-proof cloth should be stretched across the mattress and tucked in at the sides. Over this may be placed a

quilted pad. Then on top is placed a double undersheet. The sheets should be changed at least twice a week.

At night no artificial light should be kept burning in the sleeping-room. The burning of gas or kerosene quickly vitiates the atmosphere.

HOW MUCH SHALL WE EAT?

The body has often been compared to a blacksmith's forge, the lungs being the bellows and food the coal. The comparison is a good one, for food is actually burned in the body by the aid of the air we breathe.

All food is capable of being used as body-fuel and by far the greater part of it is so used. Consequently, food is measured in fuel-units, called calories. Many people eat too much, that is, too many calories; some eat too little, that is, too few calories. In both cases the person is usually unaware of the fact, because he makes the mistake of measuring his food by its weight or bulk. Some foods are concentrated, that is, contain many calories of food value in a given bulk; others are bulky, that is, contain few calories in a given bulk. For instance, olive oil is concentrated, and most vegetables are bulky. A third of an ounce of olive oil contains 100 calories, which is as much as is contained in a pound or more of tomatoes, lettuce, celery, cucumbers, string beans, asparagus, or water-melon.

It will help to give a picture of food values if, before going further, we note how much it takes of some of the common foods to make a given amount of food value, say 100 calories. It is surprising in how many cases the ordinary amount of food served at table happens to contain about 100 calories. We find 100 calo-

ries in a small lamb chop (weighing about an ounce); in a large egg (about 2 ounces); in a small side-dish of baked beans (about 3 ounces); in $1\frac{1}{2}$ cubic inches of cheese (about an ounce); in an ordinary side-dish of sweet corn (about $3\frac{1}{2}$ ounces); in one large-sized potato (if baked, about 3 ounces; if boiled, about 4 ounces); in an ordinary thick slice of bread (about $1\frac{1}{2}$ ounces); in three teaspoonfuls or $1\frac{1}{2}$ lumps of sugar (about 1 ounce).

The ordinary sedentary man needs about 2,500 calories per day. But the larger person (provided the bulk is due to muscle and active tissue and not to fat) or the more muscular the work he does, the more food he needs.

Generally the quantity of food should be slightly decreased in hot weather, when fewer calories are needed to sustain the heat of the body. In particular, less meat should be eaten in the summer, on account of what is called the "specific dynamic action of protein," that is, the special tendency of meats and like foods to produce immediate heat.

Each individual must decide for himself what is the right amount of food to eat. In general, that amount is right which will maintain the most favorable condition of weight. the weight, endurance, and general feeling of well-being are maintained, one may assume that sufficient food is taken.—From "How to Live."

THE FAMILY HAZARD.

Given a good doctor and a sick man—just those two alone—and the latter is to be felicitated upon the situation. When there is introduced the complication of the anxious wife, the solicitous family, and the critical neighbor. Heaven help both doctor and patient, and all of us! Many an important life has been sacrificed upon the altar of extramedical solicitude, when with the same disease a poor devil without friends would recover. To harrow up the doctor's soul with the anxieties over his responsibility warps judgment, saps vitality, and introduces an extraneous element with which the doctor has no business to deal. His duty to every patient is the same; it is to give his best talent and skill. When the life of the Empress was in danger, Napoleon saw that the physician was embarrassed by his great responsibility. With his extraordinary knowledge of men and his faith in the conscientious skill of his physician, he said: "She is but a woman; forget that she is the Empress, and treat her as you would the wife of a citizen of

the Rue St. Denis." The physician simply did as he thought was best for his patient in peace of mind and confidence, and the Empress recovered.

The best results to both doctor and patient accrue if the former can concentrate his attention upon one thing—the proper treatment of the case before him. When he has to practice feints, and exercise his ingenuity to make his conduct and practice conform to the whims of by-standers; when the demand for concealments from some and collusions with others are thrust upon him; and when his nervous system is assaulted by alarms and solicitations, the interests of his patient are jeopardized and his own days shortened.

The wise physician does the best he can for all. The wise friends of patients spare him as much annoyance as possible, and aim to help rather than to hinder him in the work of his lofty calling and in the exercise of his best skill and judgment.—JAMES PETER WARBASSE, M. D.

WHAT YOU CAN DO ABOUT FLIES.

Destroy all breeding places.

Clean up and disinfect manure piles. Remove the manure piles at least once a week in the summer.

Keep garbage cans clean and cover your neighbor's garbage can is your business.

Allow no decaying matter to accumulate about the yard.

See that the cesspools and privy

vaults are inaccessible to flies. Clean them out as often as necessary and disinfect.

Keep flies away from the sick, especially those ill with contagious diseases. Kill every fly that enters the sick room. His body is covered with disease germs.

Screen all windows and doors.

Screen all food. You do not know

where the fly that gets on the food has just been.

One uncovered garbage can or manure pile can develop more flies than a neighborhood can destroy.

If you have a fly breeding place near your home, you owe it to your family to have it abated.

If there is no dirt and filth there will be no flies.

THE CARE OF THE SKIN IN SUMMER.

By DR. LEOPOLD SCHILLER.

There are certain conditions of the skin which are liable to occur during the summer provided the necessary care is not exercised in the wearing of proper clothing, the frequent changing of clothing, washing and bathing. The tendency of dressing children too warmly is mostly responsible for this.

The most common condition met with during this time is prickly heat. Excessive sweating mostly due to too much clothing, which also is allowed to remain on the body without change causes an irritation of the skin leading to a formation of small red papules, which are quite annoying owing to the constant itching which accompanies them.

The remedy for prickly heat consists in keeping the skin as dry as possible. This can be done by discarding all unnecessary clothing, washing the body frequently with a weak borax or soda solution, about a teaspoonful of either in a quart of water, then dry the skin well and apply a dusting powder, such as the ordinary talcum powder. This must be done a number of times during the day.

Another condition frequently met with, especially in stout individuals, is Erythema Intertrigo, or chafing. This occurs on parts of the body that lie in close contact with each other,

and where there is friction. The perspiration and natural secretions are increased and form a favorable soil for the growth of bacteria, which are always present on the skin under normal conditions, but cause no trouble unless excessive heat and moisture are present. Redness, moisture, and burning and pain rather than itching are the symptoms. At times the inflammation gets more intense and leads to the formation of small blisters and pustules, giving the parts a very angry appearance. This is particularly often seen where children with urinary and bowel discharges are not kept clean and properly cared for. The treatment is similar to that for prickly heat. It is necessary that the parts which are subject to friction be kept separated by means of gauze or lint.

Sun-burn is a well known condition of the skin arising from prolonged and direct exposure to the sun's rays.

To prevent sunburn it is well to anoint the parts mostly exposed with a heavy ointment, such as zinc ointment. Alkaline lotions containing oxide of zinc when used frequently will also act as a preventative. The treatment consists in using alkaline lotions frequently during the day and a cold cream or zinc ointment at night.

FIRST AID TO THE INJURED.

Unfortunately each year brings its quota of summer accidents. The fool who rocks the boat, the inexperienced swimmer who ventures beyond his depth, and other causes add to the annual death toll from accidents. Frequently life could be saved if proper methods were promptly applied to resuscitate the victim. The following memorandum on artificial respiration taken from "PERSONAL HYGIENE" by Pyle, illustrating "Murray's" method are easily understood and can be readily carried out by a single person.

ARTIFICIAL RESPIRATION is the imitation, as nearly as possible, of natural breathing. We breathe from sixteen to eighteen times a minute; this number of chest movements must not be exceeded, or the lungs cannot expand to fill thoroughly with air nor contract to expel the air.

To produce artificial respiration in case of drowning or of suffocation, the patient's clothing is first removed and the body is quickly dried. The mouth, the throat, and the nose should be cleared, and the tongue be pulled forward to facilitate access of air to the windpipe; a roll, a pillow, a rolled-up coat, or a piece of wood should be placed under the shoulders. The arms near the elbows should now be grasped and be swept around horizontally, away from the body, until the hands meet over the head; this movement raises the ribs and expands the chest as in inspiration; the arms should then be brought down to the sides, the elbows meeting almost over the pit of the stomach; pressure is then made against the chest-wall,

producing contraction of the chest; the arms are to be held in the latter position a few seconds, and then the movements are repeated. From twelve to fifteen respirations will be sufficient. The mouth must be kept open and the tongue be held forward.

DROWNING.—In asphyxia or suffocation from drowning, if the person when taken from the water is breathing, he should be removed, if possible, to a near-by house and put into a hot bath, which will act as a stimulant; or heat may be applied directly over the heart and other vital organs, the head and shoulders be raised, stimulants given, and the body briskly rubbed. This can be done until the arrival of a physician. In all cases of **SUFFOCATION** the throat must be cleared, so that fresh air can reach the lungs.

FOR LIGHTNING-STROKE AND ELECTRICAL INJURIES the treatment is the same as that for shock and for burns. In case of **ELECTRIC SHOCK**, the electric current should be broken instantly. Free the patient from the current with a single quick motion, using any dry non-conductor, such as clothing, rope, or board, to move patient or wire. Beware of using any metal or moist material. Meantime have every effort made to shut off current. If the victim is not breathing, he should be given manual artificial respiration at once. If the patient is breathing slowly and regularly, do not give artificial respiration, but let Nature restore breathing unaided.

FAINTING.—The head of a person in a faint should be lowered and feet

raised, the blood being thus sent back to the brain. Plenty of air, the clothing loosened about the neck and chest, and a little cold water dashed over the face are usually sufficient to restore consciousness. A method often practised is to place the patient on a chair, and to push the head down between the knees, the hands hanging down at the side. The patient is kept in that position until the face becomes red, being then able to rise and walk about. This position restricts the abdomen and shuts off the blood-supply to the lower extremities, the blood going to the brain. Strong ammonia should not be held to the nostrils of an unconscious patient, as it is very irritating. The pulse should be watched, and, if consciousness does not soon return, heat should be applied, and a physician be sent for. Little can be done for loss of consciousness from heart-failure beyond stimulating a flagging pulse until the arrival of medical assistance.

SUNSTROKE.—The symptoms of sunstroke are a temperature of from 105° to 112° F., sometimes higher, a flushed face, stertorous breathing,

and unconsciousness. The patient should be put into a cold bath and rubbed with ice. If at the seaside, he may be carried to the beach and put in the water; the head may be kept cold by bathing it or by the application of handkerchiefs wrung out of the water. If a cold bath is impossible, the patients may be doused with cold water from a hose-pipe or from pails, and cold cloths be kept on the head. The cold-water treatment must be continued until the temperature has fallen, after which the patient should be put to bed, and, if there is depression, be given stimulants moderately. Should the temperature begin to rise, the above treatment should be renewed.

HEAT-EXHAUSTION is caused by too long exposure to a very high temperature; the blood leaves the brain and the surface of the body and goes to the large blood-vessels of the abdomen. The symptoms are those of shock. The treatment is the same as that for shock; hot bath if possible, or heat applied to all parts of the body; stimulants of alcohol or strong coffee.

Eat Fresh Perishable Food Products.

This is the time of the year when every effort should be made to utilize fruits and vegetables grown near home. With the quantity of perishable foodstuffs put on the market by commercial gardeners, plus the crops of the war gardens and back-lot gardens, there is sure to be a large percentage of valuable food wasted, unless every effort is made to utilize it to the fullest extent throughout the garden season.

Consumers should not forget that the use of the short-lived foods liberates the more concentrated and staple foods for people in the remote sections of the country, and for our soldiers and our allies. This not only results in increasing the surplus which can be exported, but greatly relieves the transportation facilities of the country, which are over-taxed already.

Food distributors should make every effort to push perishable foods this time and consumers should see that the season's fruits and vegetables find a ready place on their table.

It is neither patriotic nor good sense to use canned goods when fresh products are available.

MILWAUKEE COUNTY COUNCIL
OF DEFENSE.

ONE NON-ESSENTIAL INDUSTRY.

The question as to what constitutes a non-essential industry in war time cannot be answered offhand. The complexities of modern business are such as to make it extremely difficult to determine just what industries should be suspended under the stress of war conditions without inflicting a greater economic injury than is justified by the possible benefits that might accrue. There is one business, however, that those who have given the problem any study would have to admit should be largely dispensed with during the war—and might properly be largely dispensed with at all times—and that is the manufacture of nostrums. Every physician and every druggist knows that there is not a "patent medicine" on the market today whose place is not better filled by official products that are found on the shelves of every druggist in the country. Every physician and every druggist knows that the "patent medicine" maker aims, not to furnish drug products that can be obtained in no other form, but to duplicate in infinite variety, with secret mixtures, the non-secret preparations already on the druggists' shelves and, what is far worse, to

stimulate unnecessary self-drugging on the part of the public. It is true that, if the "patent medicine" industry were destroyed, druggists would for awhile suffer financial loss, not because they derive a large profit from "patent medicines," but because the public, being deprived of the lying scare-heads of "patent medicine" advertisements, would buy fewer drugs of every kind. Certainly, however, this loss to some thousands of druggists would be an immeasurable gain to some millions of people. The exploiters of a widely heralded nostrum have bragged in their advertisements of the number of carloads of their mischievous alcoholic mixture that they have shipped to certain points. Does even the intelligent layman believe that under present conditions there is any excuse for taking up valuable shipping space with such worthless, if not dangerous, trash? And this is but one of scores. If there is one industry in the United States whose suspension at the present time is justified on the grounds of public health, greater efficiency and avoidance of waste, it is the nostrum industry.

—A. M. A.

Don't forget that the only good fly is the dead fly. Swat every one.

PATENT MEDICINES

Our government has asked that we all make an effort to help save 100,000 babies this year.

The doctors and druggists of Milwaukee are ready to do their "bit" by taking care of rich and poor alike.

No parents are justified any longer to experiment on their children with patent medicines on account of not being able to pay for the services of a doctor and a druggist, as both of these professions are ready to give everything free to sick children who are unable to pay.

The patent medicine venders, no doubt, also wish to do their "bit" in this Child Welfare Campaign of the U. S. Government and for that reason are making a special appeal in the current newspaper advertisements. As an example we will reprint the following advertisement as found in one of our great daily newspapers:

"I have been using Doctor Caldwell's Syrup Pepsin for more than seven years. I believe it saved my little grand-daughter's life, as she had such terrible spasms, caused by the condition of her stomach, until we gave her Syrup Pepsin. Our family thinks there is no remedy like Dr. Caldwell's Syrup Pepsin for the stomach and bowels."

(From a letter to Dr. Caldwell, written by Mrs. C. F. Brown, 1012 Garfield Ave., Kansas City, Mo.)

According to the American Medical Journal, Dr. L. F. Kebler, Chief of

the Division of Drugs of the Bureau of Chemistry of the Department of Agriculture, classes Syrup Pepsin among "Products for which False or Fraudulent Claims are made."

The Journal closes its report on the patent medicine as follows:

"Taking the results of the Federal Chemists with those of the Association's laboratory, it seems that Caldwell's Syrup Pepsin is essentially a laxative of the senna type. The lack of any appreciable quantity of pepsin, as reported by the Federal authorities, would seem to indicate that the name would constitute misbranding under the Federal Food and Drugs Act."

The quickest and easiest way for our government to attempt to save the 100,000 babies of this year would be to contract with the Dr. Caldwell's Syrup Pepsin Company of Monticello, Ill., to do the work. The Children's Bureau of the U. S. Government, however, has decided that the safest and surest way is to depend upon its loyal citizens and doctors and not upon patent medicines to save 100,000 lives.

Patent medicines may not kill children, but they kill time and time lost when a child is sick, many times means a life lost.

If you must experiment with patent medicines, do so on yourself or your dog, but do not try it on your helpless children.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

June, 1918.

Annual Death Rate per 1000.....	9.87	Population of U. S. Census.....	373,857
Annual Birth Rate per 1000.....	27.5	Population (Est.) 1917.....	445,000
Annual Death Rate, Males.....	4.8	Annual Death Rate, Females.....	5.
Annual Birth Rate, Males.....	13.2	Annual Birth Rate, Females.....	14.3
Death Rate less, Violence.....	9.1	Birth Rate less, Still Born.....	26.7

Deaths recorded	366	Births recorded	1021
Marriages	394		

BIRTHS.

SEX.	COLOR.	BY WARDS.	
Males.....490	White.....1015	First	26
Females.....531	Colored.....6	Second	34
		Third	28
		Fourth	22
		Fifth	30
		Sixth	30
		Seventh	29
		Eighth	59
		Ninth	21
		Tenth	29
		Eleventh	54
		Twelfth	36
		Thirteenth	47
		Fourteenth	53
		Fifteenth	22
		Sixteenth	24
		Seventeenth	42
		Eighteenth	8
		Nineteenth	25
		Twentieth	59
		Twenty-first	51
		Twenty-second	35
		Twenty-third	33
		Twenty-fourth	36
		Twenty-fifth	34
		Hospitals	154
		Pairs of twins	13
		Triplets	—
		Illegitimate	25
		Still born	29

REPORTED BY

Physicians	787
Midwives	197
Others	17

NATIVITY OF PARENTS.

	Both	Father	Mother
Milwaukee	101	40	72
Wisconsin	285	95	129
United States	50	40	70
Germany	40	45	36
Poland	45	15	2
Austria	45	14	7
Bohemia	1	—	—
Sweden	—	2	—
Italy	23	2	2
Roumania	2	—	1
England	4	3	2
Holland	—	4	1
Norway	2	2	2
Slavonia	6	—	—
Hungary	26	3	4
Russia	38	16	—
Canada	1	2	2
Greece	6	3	—
Unknown	—	10	1
Ocean	—	—	—
Elsewhere	10	10	5

MARRIAGES REGISTERED.

	Groom	Bride		Groom	Bride
Oldest	73	59	White	390	390
Youngest	20	16	Colored	4	4
Widowed	33	25	Others	—	—
Divorced	19	16	Total	394	394

NATIVITY.

	Both	Groom	Bride		Both	Groom	Bride
Milwaukee	27	9	18	England	—	4	4
Wisconsin	162	34	64	Holland	—	—	—
United States	18	42	27	Norway	1	—	—
Germany	8	24	13	Slavonia	—	—	1
Poland	2	7	—	Hungary	1	3	3
Austria	9	8	7	Russia	13	3	2
Bohemia	—	—	—	Canada	—	—	—
Sweden	—	2	2	Greece	4	—	—
Italy	2	—	1	Elsewhere	1	3	1
Roumania	1	—	—				

AGE.

	Groom	Bride
Under 21	22	7
21 to 25	120	226
25 to 35	179	113
35 to 45	52	34
45 to 55	11	9
55 to 65	7	5
65 to 75	3	—
Over 75	—	—

RESIDENCE.

	Groom	Bride
Outside State	19	9
Outside City	45	30
Married outside State.....	17	—

CEREMONY.

By Judges	32
By Justices	17
By Ministers	345

DEATH AND REPORTABLE DISEASE RECORDS.

Months.....	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June
Total Deaths.....	425	336	358	*384	395	386	402	411	504*	639	464	366
Annual Death Rate.....	11.58	9.1	9.76	10.47	10.77	10.52	10.84	11.08	13.59	14.53	12.51	9.87
Cases and Deaths.....	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Typhoid Fever.....	2	1	4	2	10	2	0	10	38	7	1	9
Measles.....	174	1	36	0	12	0	12	0	12	15	1457	18
Scarlet Fever.....	102	4	36	0	12	0	12	0	12	15	1457	18
Whooping Cough.....	145	3	98	3	94	3	153	3	153	91	5	86
Diphtheria.....	55	7	65	8	60	13	98	10	55	8	184	6
Influenza.....	0	0	0	0	0	0	0	0	0	0	3	23
Small Pox.....	7	0	4	0	2	0	2	0	2	0	3	0
Poliomyelitis.....	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculosis Pulm.....	90	41	85	25	78	38	28	27	53	22	48	98
Cancer.....	26	2	21	2	1	1	1	1	1	1	1	1
Meningitis.....	5	3	2	7	16	17	0	3	6	13	0	26
Apoplexy.....	25	21	14	10	22	18	0	16	3	10	15	30
Org. Heart Disease.....	40	22	24	31	30	24	0	32	25	24	20	21
Bronchitis.....	4	4	4	7	11	5	0	6	12	17	34	35
Pneumonia.....	25	12	12	37	32	44	0	57	88	172	70	34
Diarrhoea—Under 2.....	6	19	35	20	32	17	0	16	20	19	13	5
Nephritis.....	35	27	12	17	28	29	0	25	24	36	19	22
Congenital Debility.....	36	22	20	21	21	29	0	32	26	23	26	23
Senility.....	7	4	3	7	6	3	0	3	4	8	29	3
Violence.....	43	52	34	31	44	31	0	21	24	29	23	28
Suicide.....	4	13	9	6	8	9	0	4	5	6	7	6
Homicide.....	2	1	3	1	17	0	0	3	0	1	2	1
Under 30 days.....	50	36	30	31	32	48	0	50	54	46	46	45
Between 30 days & 1 year.....	17	32	50	39	43	35	0	42	57	69	56	25
1 to 5 years.....	27	26	31	26	18	18	0	33	64	69	52	37
5 to 60 years.....	191	153	156	164	190	174	0	161	201	309	178	162
Over 60 years.....	140	89	91	124	112	111	0	116	125	146	132	97
Age at Death, all ages.....	39.2	34.5	34.9	45.6	38.5	37.8	0	39.2	32.5	34.7	34.4	34.6
Age at Death, 5 yrs.....	51.2	46.5	50.6	59.7	50.5	51.2	0	56.9	54.7	49.	50.1	50.1
Public Institutions.....	102	89	75	101	108	94	0	87	101	139	90	90

* Rabies 1 death. Anthrax 1 death. * Pallagra 1 death.

LAUGH WITH US—TO LAUGH IS HEALTHFUL; It Aids Digestion And Drives Dull Care Away.

THEN A DEEP SILENCE REIGNED.

Capt. Jinks was giving a dinner party and had arranged a nice little toast list in deference to the presence of Maj. Claquor, an able after-dinner speaker.

The latter was accompanied by his wife, a very deaf old lady, who was much attached to him. As the gallant officer was to respond to the toast of "The Babies," his wife, knowing his fondness for children, judged that it would suit him admirably.

At the last moment, however, the major's subject, unknown to his lady, was changed to "The Ladies." But it made no difference to the officer, and his sparkling speech delighted the company. As the echo of clapping hands died down the major's wife broke forth: "You don't know how fond the major is of them. I've seen him with two of them on his lap at once. Just teasing the life out of the poor things. Every chance he gets he's sure to have them in his arms, or romping with them; knowing his loving nature, they'll come to him when they won't go to anybody else." —A. M. A.

FINAL BID AWAITED.

The centenarian was being eagerly interviewed by reporters, and was asked among other things, to what he attributed his long life and good health.

"Well," the old man replied slowly, "I'm not in a position to say at the moment. You see, I've been bargaining with two or three of them patent medicine concerns for a couple of weeks, but I ain't quite decided yet."

—Exchange.

SAFE THROUGH IT ALL.

An old darkey got up one night in meetin' and said:

"Bredders an' sisters—you knows an' I knows that I ain't been what I oughter been. I'se robbed hen-roosts an' stole hogs an' tol' lies an' got drunk an' slashed folks wi' ma razor, an' shot craps an' cuss'd an' swore; but I thank de Lord dere's one thing I ain't neber done—I ain't neber lost my religion." —

FILLING THE BILL.

She—"I like a man of few words and many actions."

He—"You want my brother; he has St. Vitus' dance."—*Tiger*.

If you wish to keep cool this summer, eat little meat, sugar and fats, for these are all heat producing. Send them to the boys in France, so that they can make it hot for the kaiser and his gang.

Doctors are getting more scarce each day; you had better learn how to keep well.

Our country is now the wealthiest nation in the world; let us make it the healthiest.

CARE of the BABY

IN SUMMER.

The following rules should be observed:

Don't wean the baby in summer.

Keep flies away from the baby, its food, and belongings.

Keep everything away from its mouth but its food.

Keep the house, and especially the kitchen, screened, and burn all garbage at once.

Keep the baby on the shady side of the street.

Give it plenty of cool boiled water to drink.

Sponge it twice a day in addition to the bath.

The less clothing it wears the better.

Do not handle the baby much. Let it lie on the mattress in a cool place, but, preferably, keep it on the porch or in the yard or park.

If there is vomiting or diarrhea, stop all feeding for six hours, give it boiled water or cooled barley-water and 2 teaspoonsful of castor oil and an injection. If the symptoms are not easily checked, a physician should be summoned.

MILWAUKEE HEALTH DEPT.

SEP 24 1918

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

AUG.-SEPT. 1918.

Vol. 8, No. 8-9.

LET us not forget that the entire child goes to school — body, soul and mind. Any system of education which ignores one or the other of these factors, will be to the disadvantage of the child.

— ROSENAU.

Bulletin of the Health Dept., Aug.-Sept. 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIGDE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M., 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

MEDICAL INSPECTION OF PAROCHIAL SCHOOLS.

Central Office—Sixth Floor, City Hall.

The Dental Clinic is located in room _____

The Health Department makes medical inspection of all parochial schools in the city. There are five physicians employed in this work. Five nurses are also employed, who visit the children in their schools and make visits at the homes. The medical inspectors give no treatment to children, but examine them to determine what defects exist and to advise

the parents concerning the correction of these defects. They also make physical examination of children attending parochial schools.

The Dental Clinic is open each week-day from 9:00 a. m. to 5:00 p. m., with the exception of Saturday, when it is open from 9:00 to 12:00. Free dental attention is given to children whose parents are not able to provide needed attention. Parents who desire this attention for their children should make application at the office in the City Hall. The dentist will receive patients at the clinic who do not have an appointment card made out from the Central Office.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

AUG.-SEPT., 1918

Communicable Diseases and the Schools.

By GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

Each fall the opening of schools is marked by an increase in the number of cases of communicable diseases.

While seasonal changes may be conceded as of some influence, the explanation for this appears mainly to be represented in two factors—the schools and the child.

The damaging influence upon the health of the child from poorly ventilated and overcrowded school rooms, badly adjusted seats and desks, long periods of study and worry over lessons, no one claiming any information on the subject will deny. Bad air, fatigue, and worry are all powerful factors in predisposing to, if not actually causing, communicable disease. One remedy, therefore, in reducing the number of cases of communicable disease among school children will be found in providing better ventilation, proper seating, shorter study periods, and a less overburdened curriculum.

The results obtained in the so-called "Open Air Schools" should prove rather convincing on this point. Not only are the pupils at these schools able to do all the work of the regular schools, but they do so with less effort, in less time, and with greater freedom from illness except for the one that—we are

tempted to say fortunately—has brought them to these schools. Why not, then, have all our schools transformed into open air schools?

The child is the other factor in the contagious disease problem among school children, and is by all means the most important factor. It brings the communicable disease to school, and is in turn the recipient of such communicable disease.

The child, however, is not to blame for this. Its parents, however, are very much to blame. Parents too frequently look upon schools in the light of nurseries—convenient places to which to send their obstreperous offspring while they devote themselves to their work or pleasure.

Parents are largely to blame for the spread of communicable diseases among children in that they permit a sick child to go to school. No child that is sick, no child with a "cold" should be sent to school or be permitted to play with other children. It is criminally wrong to the sick child as it is criminally unfair to other children. A child that is sick cannot profit by going to school, it only interferes with the work of the class, and may become the cause of serious illness to a great many of its fellows at school.

THE HYGIENE OF INFANCY.

From "Personal Hygiene"—Pyle.

BATHING.

Infants' toilet articles are best kept in the tray of a hamper-like basket, the lower part of which holds clothing. The following articles are needed: absorbent cotton for eyes and mouth, salicylated cotton for the wound, two soft wash-rags (made of cotton stockinet), pure soap in a celluloid or metal box, baby's soft hair-brush and fine comb, olive oil and vaselin, safety-pins of various sizes, blunt scissors, soft towels, an old soft blanket in which to wrap the child after the birth, a woollen shawl, one change of clothing.

Although the nurse washes the baby at first, the mother should know how it is done. The first bath is given before a fire, except in the summer, with the doors and windows closed and a screen placed around the tub to prevent draughts. The nurse sits in a low chair beside the tub, wearing a flannel apron over a rubber one, with the baby's basket and hot and cold water at hand. The baby, wrapped in the old blanket, is first rubbed all over with olive oil. It is covered up again and laid on its back. Next its face is washed with warm water and cleansed with absorbent cotton wet with boric-acid solution. The mouth is cleansed with absorbent cotton wound around the nurse's finger.

Then the water for the bath is procured and the temperature ascertained by a bath-thermometer encased in wood. This should be about

100° F. After the baby's body is washed with soap and water by means of the other wash-cloth, it is placed in the tub for a minute or two, covered up to the neck, the head and back being supported by the nurse. Then the baby is laid on the nurse's lap and patted dry with the soft towels, while lying first on the back and then on the stomach.

Subsequent baths are similar to the first, except for the omission of the olive oil. After six months the temperature should be 95° F. for winter and 80° F. for summer. The duration is lengthened from one to two minutes to five minutes. Many physicians, however, advise no tub-bathing, but merely sponging, prior to the falling off of the cord.

The bath-tub may be a large basin or foot-tub of metal or porcelain. A convenient form rests on slats on the ordinary bath-tub, and is filled by a hose connected with the faucets. Better still is the folding rubber tub, which may be a substitute for a bed also. A piece of oil-cloth or rubber sheeting should be placed under the tub. A china basin with one compartment for cold water and another for hot is useful.

In order to accustom the baby to immersion without fear in water—so valuable not only for cleanliness, but also in case of fever or exhaustion—it is necessary to begin very early in life and to be careful always to lift the baby into the bath slowly and gently, supporting the

head with one hand, so as to keep it above the water. It is well to place a towel in the bottom of the tub to prevent slipping. Fear that has been aroused in any way may be dispelled by letting the child play on this towel or blanket in the empty tub, and then adding the water in gradually increasing amounts from day to day. Another plan is to cover the tub with a blanket, upon which the baby is then laid, both being lowered into the water.

The soap used on the baby must be pure and unirritating. None is better than Castile of a reliable brand and positively made of olive oil. A special cloth should be kept for use only on the baby's face, and another for the remainder of the body. These cloths should be washed, dried, and aired thoroughly before using again. The water should be soft. If only hard water is available, boiling will improve it, though rain water is preferable. If the water is not clear, it must be filtered by a flannel bag tied over the faucet. This bag must be changed every day.

The head and face should always be wet before the rest of the body. When the baby can sit alone, the water need only be as high as the armpits. In hot weather, several cool baths may be given daily. The towels for drying should be of the softest material. After drying it is well to apply friction in the form of brisk rubbing with the palm of the hand. If the baby is delicate, an alcohol, warm whisky, or olive oil rub is advised.

After drying pure talcum powder may be applied to the folds and creases of the skin, as in the armpits and groins. If these are too dry, cold cream is of service.

The mouth should be washed daily, after the bath and after each feeding, by the mother's finger, wrapped with absorbent cotton, or a soft cloth wet in water in which a little borax has been dissolved. When the baby acquires teeth, they should be rubbed with a moist cloth night and morning.

The head should be gently soaped and washed and dried at the time of the daily bath. After six months soap is used less frequently, but water daily. The occasional application of vaselin is of value. The hair should be brushed only, the comb being used merely for parting it.

Regularity of the bath is of paramount importance. The baby should be bathed at the same hour every day, and before nursing, or at least one hour after. The best time is about 9 or 10 o'clock in the morning.

In addition to the daily bath, the lower parts of the body must be cleansed with warm water after each movement and thoroughly dried and powdered to prevent chafing. Frequently it is advisable to give the whole body an evening sponging also.

Finger-nails and toe-nails should be carefully trimmed with scissors. The toe-nails should be cut with straight and not rounded corners to prevent ingrowing of the nails.

To breathe is to live. Learn to breathe properly so that you may live properly.

THE PREVAILING DISEASE OF TO-DAY.

By JOHN P. KOEHLER, M. D., Deputy Commissioner.

Everyone knows that the physician treats many cases of tuberculosis, cancer, measles, pneumonia, gastro-intestinal disturbances and venereal diseases, every year of his active practice, but very few people realize that there is a disease which drives more people to the doctor every year than all of the above mentioned diseases combined.

While every effort is made to discover the cause in other diseases, nothing is done by either laymen or doctors to eradicate a disease that may not have a high mortality rate, but certainly causes enough suffering to the patient and his family to warrant some one going "Over the Top" for him. The disease I refer to is called hypochondriasis, so called because originally it was thought that the seat of the trouble was just below the breast-bone, which space is called hypochondria.

The condition according to dictionaries is a mental disorder, characterized by morbid anxiety as to the patient's health, often associated with stimulation of diseases and frequently developing into melancholia. Some of our definitions would be about as follows:

Looking for trouble, where there isn't any.

Crossing bridges before you come to them.

Looking for a disease because you think you have a symptom.

Making your own diagnosis on a limited knowledge of disease.

The causes of hypochondriasis are many.

Pampered children are asked so many times by indulgent parents, whether they have a stomachache, toothache, earache, headache, etc., that many children really believe they have an ache when they are physically alright.

The young medical student suddenly becomes frightened when reading the symptoms of certain diseases and rushes to the drug store for self medication or to his teacher who eases his mind by telling him that his disease is an imaginary one.

The young man reads Dr. Quack's advertisement and is convinced that he has every disease enumerated by this human parasite under the heading of "Lost Manhood."

The mother feels a little tired after a hard day's work and consults the family medical book for relief. She soon learns that fatigue is a symptom of heart trouble, kidney trouble, tuberculosis and many other diseases. She recalls however that at times she has backache, so her diagnosis is kidney trouble. For fear that the doctor will scare her more than ever by verifying her diagnosis, she decides to go to the drugstore and ask for some "good kidney pills."

We could name many concrete examples from experience to show how "little knowledge is a dangerous thing," in the field of medicine, especially if the reader of family medical books and patent medicine advertise-

ments happens to be of a nervous temperament.

We find that hypochondriasis and neurasthenia or nervous exhaustion are usually congenial bed fellows. People with hypochondriasis usually worry about their imaginary diseases, until they are nervous wrecks and neurasthenics worry about everything and especially their health.

If people when first worried about their health would consult their family physician immediately a great deal of suffering might be avoided. As a rule when these patients come to the physician, they are so certain that their malady is a real one that when they are told that there is nothing wrong with them, they decide that the doctor doesn't know anything and drift from one doctor

to another until they finally meet some unscrupulous practitioner, who agrees with the patient's diagnosis and promises to cure them at the rate of \$2.00 a treatment, which really means either a mistreatment or a camouflage.

If the patient has enough confidence and money he may get relief; if either one is lacking he is apt to discontinue treatment, give up his search for health, and become melancholic and sometimes mentally unbalanced.

If you think there is something wrong with you, consult your doctor and if he tells you that you are all right, accept his diagnosis and don't feel that he doesn't understand your case, for he does, only too well.

Eighty per cent of communicable disease is spread by way of mouth. Teach your child to keep its finger out of the mouth, and keep them clean.

TO PREVENT WINTER COLDS.

Now is the time to prepare against winter colds. A simple yet very effective means for protecting against these colds will be found in systematically bathing the chest and feet in cold water each morning, followed by a brisk rub with the towel.

For the application of the cold water the shower is best. Lacking these facilities, however, a towel wrung out of cold water will do very well. The application should not be

too prolonged—not over two to three minutes. It would also be well to begin with tepid water and gradually use colder water.

The practice, if followed daily, will not only prove of value in personal body cleanliness, but will go a long ways in protecting the individual against so-called "colds" induced by sudden chilling of the body, by getting the skin surfaces accustomed to sudden variations in temperature.

BODY WEIGHT AND LENGTH OF LIFE.

From "How to Live."

Life insurance experience has clearly shown that weight, especially in relation to age, is an important factor in influencing longevity.

Except in the earlier ages of life, overweight (reckoned relatively to the average for that age) is a more unfavorable condition, in its influence on longevity, than underweight.

The question of whether an individual is really underweight or overweight can not be determined solely by the life insurance tables. Some types who are of average weight according to the table, may be either underweight or overweight when considered with regard to their framework and general physical structure. Nevertheless, it should be remembered that notwithstanding the effort of life insurance companies to carefully select the favorable types of overweight and underweight, the mortality experience on youthful underweights has been unfavorable, and the mortality experience on middle aged and elderly overweights has been decidedly unfavorable. The lowest mortality is found among those who average, as a group, a few pounds over the average weight before age 35, and a few pounds under the average weight after age 35. That is, after the age

of 35, overweight is associated with an increasingly high death rate, and at middle life it becomes a real menace to health, either by reason of its mere presence as a physical handicap or because of the faulty living habits that are often responsible for its development.

If there is a family tendency to overweight, one should begin early to form habits that will check this tendency. If considerable overweight is already present, caution is necessary in bringing about a reduction. Barring actual disease, this can usually be done without drugs if the person will be persevering and faithful to a certain regime.

Constant vigilance is necessary, yet it is worth while when one considers the inconvenience as well as the menace of obesity.

After the age of 35, 15 to 20 pounds over the average weight should prompt one to take careful measures for reducing weight. Habits should be formed that will keep the weight down automatically, instead of relying upon intermittent attempts that are more than likely to fail. No matter how well one does, one should take steps to keep out of the class that life insurance companies have found to be undesirable as risks.

HAY FEVER.

Hay fever, although occurring also in the early part of summer, especially during the month of June while roses are in bloom and, therefore, popularly referred to as "rose cold", is essentially, however, prevalent during the fall of the year, that is during the months of August and September and occasionally even later in the season until, in fact, the advent of cold weather.

It has now been quite definitely determined that the specific exciting cause for the disease is found in the pollen of certain grasses and weeds, notably that of rag weed and golden rod. In all instances, however, a neurotic element is a strongly predisposing factor. Occasionally the condition is a pure neurosis, that is without any specific exciting cause. Symptoms will appear that are identical with those of the usual hay fever. These cases will occasionally exhibit striking similarity in the periodicity of the attack; on precisely the same day and almost precisely the same time of the day will the attack make its appearance, and will cease almost as promptly as it made its beginning. In these cases auto-suggestion undoubtedly plays a very strong part.

The age period beginning with early adult life and reaching well into middle age seems the most vulnerable period for the development of the disease, although well authenticated cases are known to develop at other age periods. Men are said to be more frequently victims of hay fever than women, and individuals of a nervous temperament furnish the largest percentage of cases.

The disease usually begins with a feeling of more or less malaise, a slight elevation of temperature and frequent attacks of sneezing. Soon headache makes its appearance, the eyes are suffused, and the nose becomes blocked. Ofttimes there is also a sense of itching quite persistent and distressing which is generally attributed to the region of the soft palate and the nose, or both; there is a watery secretion from the nasal membranes, which is very irritating, and after the lapse of a few days causes more or less excoriation of the nose and upper lip.

In the severer attacks the headache may be so severe that patients are unable to pursue their occupation. The throat may become involved leading to hoarseness and difficulty in swallowing. The appetite usually also becomes very much impaired so that there is a considerable loss of flesh and marked weakness before the attack is over. Fortunately this symptomatology usually does not continue at the same degree of intensity, a considerable fluctuation during the day may be observed in the local and general symptoms. Altogether, however, hay fever must be looked upon as a disease which is capable of quite seriously prostrating its victim.

Among the by-effects which may complicate hay fever, involvement of the accessory chambers of the nose must be considered. When these are invaded by the inflammatory process, surgical interference may become necessary. The ears may also become involved, leading to tempo-

rary or permanent injury of these organs.

The treatment of hay fever calls for both local as well as general measures. Local measures are entirely palliative and should be absolutely under the supervision of a competent nose and throat specialist. The use of may hay fever remedies that are offered in the market is, to say the least, extremely hazardous and may lead to the establishment of drug habits.

Among the general measures to be taken, building up of the physical strength of the patient seems quite essential. As stated, the condition develops most frequently in individuals who are subjected to continued nervous strains. This obviously suggests rest periods. In many instances a change of location has been found to afford quick and certain relief. It appears that hay fever is more

prevalent in northern latitudes, especially in low, flat countries bordering on large bodies of water. A change from such localities to a higher and drier climate frequently is associated with prompt and striking cessation of all symptoms.

To these measures the use of vaccine has been more recently added with striking success. By the use of vaccine the susceptible individual may be greatly immunized against the effect of the various pollens that appear to be the exciting cause. Such treatment should be under the supervision of a competent specialist, not only because the administration of the treatment requires a skilled technician, but also because the symptomatology of hay fever may be due to other causes, which can only be determined by the experienced physician.

DEEP BREATHING.

Ordinarily breathing should be unconscious, but every day deep breathing exercises should be employed. "A hundred deep breaths a day" is one physician's recipe for avoiding tuberculosis. A Russian author, who suffered a nervous breakdown, found—after trying many other aids to health without success—that a retired life for several months in the mountains in which simple deep-breathing exercises practiced systematically every day formed the central theme, effected a permanent cure. Deep breathing is a great resource for people who are shut in most of the day. If they will seize

the chance, whenever it offers, to step out-of-doors and take a dozen deep breaths, they can partly compensate for the evils of indoor living.

In ordinary breathing only about 10 per cent of the lung contents is changed at each breath. In deep breathing a much larger percentage is changed, the whole lung is forced into action, the liver and abdominal circulation is promoted, and any stagnant blood in these regions is set in circulation and oxygenated. blood-pressure is also favorably influenced, especially where increased pressure is due to nervous or emotional causes.

Breathing exercises should be deep, slow, rhythmic, and through the nose, not through the mouth. A certain Oriental deep-breathing exercise is particularly valuable to insure slowness and evenness of the breath. It consists of pressing a finger on the side of the nose, so as to close one nostril, breathing in through the other nostril, breathing out of the first nostril in the same manner and then reversing the process. Attention to the slight sound of the air, as it passes through the nose, enables one to know whether the breathing is regular or is slightly irregular. Such breathing exercises can be taken at the rate of three breaths per minute, and the rate gradually reduced until it is only two or even less per minute.

Muscular exercises stimulate deep breathing, and, in general, the two should go together. But deep breath-

ing by itself it also beneficial, if very slow. Forced rapid breathing is comparatively valueless, and indeed may be positively harmful. Oxygen is absorbed only according to the demand for it in the body and not according to the supply.

Singing requires deep breathing, and is for that and other reasons an excellent hygienic practice.

The mode of our breathing is closely related to our mental condition; either influences the other. Agitation makes us catch our breath, and sadness makes us sigh. Conversely, slow, even breathing calms mental agitation. It is not without reason that, in the East, breathing exercises are used as a means of cultivating mental poise and as an aid to religious life.

—From: HOW TO LIVE.

FIRST AID TO THE INJURED.

Epileptic Convulsions.—A person seized with an epileptic fit should be placed in a safe position on the ground or floor, with the clothes loosened and a pillow or cushion placed under the head; he should be left so until the fit is over. Something should be placed between the teeth, to prevent the tongue being bitten.

Convulsions in children may be due to indigestion, pinworms, etc., or to brain excitement in rickets or to irritation of the nerve centers in teething. A great number of the disease of children are ushered in with convulsions, which take the

place of the initial chill in the adult. They may come on suddenly or gradually.

The child should be put into a hot bath (at a temperature of from 100° to 140° F.), without waiting to undress it, which can be done in the water. The head should be kept raised and cold applied to it. The hot-water bath will dilate the blood vessels of the body, thus diverting the blood from the brain to the body. If the attack is the beginning of any of the eruptive diseases, the heat will also bring out the rash, besides relieving any pain in the abdomen or elsewhere. The child is to be kept

in the bath about five minutes, and is then taken out and wrapped in a warm blanket; an enema is given to clear the bowels. A physician should be summoned at once.

POISONING.

Precautions in the Household Use of Poisons. — Accidental poisoning often arise from the administration of medicines from the wrong bottle. It is of great importance that all bottles in the house containing liniments, washes, disinfectants, etc., that are likely to be poisonous when taken internally, should be kept in dark-glass bottles and prominently labeled, and, in addition, marked "for external use only," "poison," or some other warning inscription, so that no member of the household may use them internally by mistake.

The First Treatment in all cases of poisoning, except those caused by very corrosive substances, such as strong acids and alkalis, is evacuation of the stomach contents. This may be accomplished by emetics, the stomach-pump, or siphon-tube. Be-

fore the arrival of medical aid there may be administered a large tablespoonful of mustard in a tumbler of warm water, or a solution of table-salt and warm water, not over one-half pint at a time, to avoid paralytic distention of the stomach-walls. These are very efficient household emetics, and may be assisted by tickling of the throat with either the finger or a feather. After vomiting, the patient should drink large amounts of milk or water,, and the bowels should be emptied as soon as possible. Ordinarily, any vomited matter should be preserved for the physician's inspection.

If there are symptoms of collapse, such as weakness of pulse, feeble breathing, coldness of the body, insensibility, etc., the patient should be given stimulants, such as aromatic spirits of ammonia, strong hot coffee, strong hot beef-tea, brandy, or inhalations of smelling salts, ammonia, etc. He should be placed on his back, and be surrounded with hot-water bottles and covered with blankets. Artificial respiration should be instituted if the breathing is very feeble or has entirely ceased.

MEAT AND HABIT.

The flavor of meat is such that it lends itself to the easy preparation of a palatable meal, but this flavor could undoubtedly be as well obtained if the present consumption of meat were cut in two. It is a ques-

tion of habit; but with the present reduced supply of meat one must adopt new habits. It would be highly desirable if the grain now fed to fatten beef were given to maintain herds of milch cows.—Lusk, Food in War Time.

FOOD WILL WIN THE WAR!

— HOOVER.

PATENT MEDICINES

LYDIA PINKHAM'S VEGETABLE COMPOUND.

In his Great American Fraud series, Mr. Samuel Hopkins Adams discussed the Lydia Pinkham concern in Collier's, Feb. 17, 1916, as follows:

"No little stress is laid on 'personal advice' by the patent medicine companies. This may be, according to the statements of the firm, from their physician or from some special expert. As a matter of fact, it is almost invariably furnished by a \$10-a-week typewriter, following out one of a number of 'form' letters prepared in bulk for the 'personal inquiry' dupes. Such is the Lydia E. Pinkham method. The Pinkham Company writes me that it is entirely innocent of any intent to deceive people into believing that Lydia E. Pinkham is still alive and that it has published in several cases statements regarding her demise. It is true that a number of years ago a newspaper forced the Pinkham concern into a defensive admission of Lydia E. Pinkham's death, but since then the main purpose of the Pinkham advertising has been to befool the feminine public into believing that their letters go to a woman—who died nearly twenty years ago of one of the diseases, it is said, which her remedy claims to cure.

True, the newspaper appeal is always 'Write to Mrs. Pinkham,' and this is technically a saving clause, as there is a Mrs. Pinkham, widow of the son of Lydia E. Pinkham. What sense of shame she might be sup-

posed to suffer in the perpetration of an obvious and public fraud is presumably salved by the large profits of the business. The great majority of the gulls who 'write to Mrs. Pinkham' suppose themselves to be addressing Lydia E. Pinkham, and their letters are not even answered by the present proprietor of the name, but by a corps of hurried clerks and typewriters."

Earlier in the series, Mr. Adams had said: "Lydia Pinkham's variety of drink depends for its popularity chiefly on its alcohol."

Before the Food and Drug Act Lydia Pinkham's Vegetable Compound was labeled "A Sure Cure for Falling of the Womb and all Female Weakness." After the passage of the act the "sure cure" claim was eliminated and the enlightening information appeared, "Contains 18 per cent of alcohol."

A year or two ago the chemists of the British Medical Association analyzed this nostrum and reported:

"Analysis showed it to contain 19.3 per cent by volume of alcohol, and only 0.6 per cent of solid substances; the ash was 0.06 per cent, and consisted of the constituents usual in vegetable preparations; traces of tannin and ammonia were present, and a small quantity of reducing sugar; no alkaloid was present, and no evidence was obtained of any active principle except a trace of a bitter substance soluble in ether; the remainder (0.3 or 0.4 per cent) was vegetable extractive, possessing no distinctive characters."

LAUGH WITH US—TO LAUGH IS HEALTHFUL; It Aids Digestion And Drives Dull Care Away.

ABSOLUTELY ILLOGICAL.

"I don't see any sense in doctors being sick," said little Elizabeth, "'cause they're right around with themselves all the time."

CONSERVING THE SUPPLY.

"How much cider did you make this year?" inquired Puttey of his neighbor, Savall.

"Fifteen bar'ls," was the answer.

Farmer Puttey took another sip.

"It's a pity," he said, "that you hadn't another apple. You might have made another bar'l."—Youth's Companion.

NO CAUSE FOR ALARM.

A well-known family physician in a Southern city in ante-bellums days had for his coachman an old darkey who, by reason of his position as doctor's assistant, was regarded as an authority on the health of the community.

One day while waiting for his master he was accosted by a passer-by who inquired who was dead in the adjoining block. The old darkey straightened up, gazed intently in the direction indicated, then, breaking into a broad smile, replied:

"I don't know, sah; dat's none of our killin'."—Harpers.

OUTSTANDING.

"Poor Jones! In know of several doctors who have given him up with in the past few years."

"Well, well! And he looks so healthy; what's the matter with him?"

"He won't pay his bills."—Ex.

HIS RELIGIOUS PREFERENCE.

Counihan, at the front, suffered from shell shock. Like others, he began to believe himself in personal touch with Heaven. He wrote a letter:

"Dear Lord, send me one hundred dollars."

It was decided to humor him so a check for fifty dollars was sent to him on Y. M. C. A. stationery. Then he sat down and wrote another letter:

"Dear Lord, I thank you for sending me the money, but next time send it through the Knights of Columbus. The Y. M. C. A. held out fifty dollars on me."

HOW COULD HE?

Two Irishmen in Maryland decided that they would enjoy a bit of sport on the occasion of the "opening of the reed-bird season." They were provided with tremendous game-bags, and, as it was their first experience, they were very enthusiastic.

Suddenly Callahin spotted a bird, and, taking very careful aim, prepared to fire the fatal shot. But Casey seized him by the arm, crying frantically:

"Don't fire, Callahan, don't fire! You've forgotten to load your gun!"

POPULAR WITH THE YANKS

Question—Why is a slacker like lemon meringue pie?

Answer—Because he's yellow all the way through and hasn't crust enough to go Over the Top.

COMMENT ON CURRENT TOPICS.

Owing to insufficient funds, the bulletin will be published by combining several issues into one.

* * *

A special course of lectures on First Aid and Home Care of the Sick, on Child Welfare, on Contagious Diseases and how to avoid them, will be given by the Health Department during the coming fall and winter. The stations where these lectures will be given will be announced later. Admission to the lectures will be free.

* * *

Do not forget that this is Children's Year, and that Milwaukee must save at least 600 babies. You can do your share by bringing to the attention of the Health Department all families having children in need of medical care and attention or milk. All information received in this connection will be strictly confidential.

Call: Health Dept. Child Welfare Division, Broadway 3715.

School Day Don'ts

DON'T send a sick child to school.

DON'T forget that a healthy mind can thrive only in a healthy body.

DON'T forget that *Plenty of Fresh Air, Plenty of Nourishing Food and Plenty of Sleep* are very necessary for the child that goes to school.

DON'T forget to give prompt attention to the child with "a cold," sore throat, earache, bad tooth, weak eyes or headache.

MILWAUKEE HEALTH DEPT.

Broadway 3715.

City Hall.

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JAN 8 1919

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

OCT. and NOV. 1918.

Vol. 8, No. 10—11.

*DO Your Part To Make the Nation Fit
For War or Peace!*

Bulletin of the Health Dept., Oct.-Nov. 1918

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIDGE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS MAXINE BIEBESHEIMER, Supervisor of Nurses.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

MILWAUKEE HEALTH DEPARTMENT

Is at your service

FREE

Health Bulletin.
Small Pox Vaccine.
Diphtheria Antitoxine.
Anti-rabic treatment.
Typhoid Vaccine.
Influenza Vaccine.
Pneumonia Vaccine.

Ambulance (contagious).
Consultation.

Consists of

Four institutions.
Nine divisions.
Nine clinics for diagnosis only.
166 employees.
36 in active war service.

It is fighting disease in the first line trenches—back it up.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

OCT.-NOV., 1918

INFLUENZA IN MILWAUKEE.

By GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

The influenza epidemic was officially first brought to the attention of the Health Department on Sept. 26th, when 6 cases of this disease were reported. From this time up to the 4th of November, when the closing ban formulated by the department was cancelled, a total of 8,732 cases were reported.

On the 10th of October, when 314 cases were reported, the Health Department asked and obtained authority from the Common Council to deal summarily with the situation by preventing all unnecessary public gatherings. These orders were in force up to the 4th day of November, a period of 24 days.

At the same time a most extensive publicity campaign was inaugurated which by the use of street posters, hand bills, printed in various languages and distributed through schools and factories, and by personal talks to large groups of employes in workshops, sought to inform every citizen with regard to the danger of the disease and in the methods for the avoidance of the same. The newspapers of the city also gave splendid support by carrying the directions for the control of the epidemic in the news columns as well as by editorial comment.

The Common Council appropriated

the sum of \$15,000 for the purpose of fighting the epidemic, a sum which was duplicated by the County Board of Supervisors. Two hospitals were established for the housing of influenza and pneumonia cases, one of these was used exclusively as a hospital for children, the other for adult patients.

The crest of the epidemic apparently was reached on October 14th when the total number of cases reported on one day reached 785. From that time up to November 4th there was a continuous drop in the daily number of cases, so that it seemed reasonable and safe to lift the ban. A total of 364 deaths unfortunately resulted from complicating pneumonia, giving a percentage of 4.16% to the total number of cases reported.

In comparing the more fortunate outcome of the epidemic in Milwaukee, as compared with experiences in other large cities of the country, three factors may be pointed to as having essentially brought about this result—first, the readiness of the public to comply with regulatory measures for which they had been prepared by reports of what happened in other cities; second, the early establishing of closing orders and wide publicity; and third, the splendid co-operation which the depart-

ment had at the hand of the Common Council and various organizations.

It must be recognized that the closing order could do no more than stagger the peak in the incidence of the infection. By avoiding the simultaneous development of large numbers of cases, for which neither an adequate number of physicians nor hospital facilities were available, the spread of the disease itself undoubtedly was checked as well as the number of deaths lessened.

It is not possible here to enumerate in detail the various agencies that so splendidly assisted during the trying period of the epidemic. To all of these, however, the department hereby officially expresses its gratitude and appreciation.

As for a prognostication of what the future developments of the his-

tory of influenza in this country and in this city will be, it is difficult to make a definite forecast. Cases of influenza undoubtedly will be with us all through the winter. There may be recurrent outbreaks of the epidemic and it may be necessary to reestablish the closing order. To what extent this will be necessary will depend largely upon what the public will be willing to do to help.

It is impracticable to indefinitely keep closed and paralyze the business and industry of a large city, nor will this be necessary if every citizen will see to it that he will carefully carry out the measures in personal hygiene which this department has urged from time to time and which are published elsewhere in this bulletin. It is necessary, however, that this be done faithfully and that all will do it.

WHY AMERICAN PEOPLE HAVE THE WORST TEETH ON EARTH AND HOW TO REMEDY THIS CONDITION.

By DR. V. A. SMITH, Health Department Dentist.

"Decayed and neglected teeth are the cause of more pain and discomfort in the human family than any other single cause."—*Major W. O. Owen, M. D., Surgeon U. S. Army.*

This statement is only too true. It is a well known fact that a great number of the ills suffered by the human race are directly traceable to the teeth, and it is a startling fact that 90 per cent. of the people of America have bad teeth. It is perhaps more

startling that 80 per cent. of these people never go to a dentist, and a large majority of them give their teeth no care whatever. There are in the United States today *ten million* school children suffering from decayed teeth and unsanitary mouths; 40 per cent of the absentees from school are caused by toothache.

These facts are stated here to show the importance of giving the teeth proper care.

American teeth are the worst on earth; and this condition is due largely to our mode of living and eating. No nation in the world consumes so much rich, soft food as America, and no nation consumes food in so short a space of eating time, thereby neglecting one of the most important functions of the mouth, that of masticating—grinding the food with the teeth and mixing it with the saliva so that the stomach can more readily digest it. This function is almost entirely neglected when we eat the soft food so commonly used. An examination at Ellis Island of the teeth of immigrants from nearly all European countries showed that with the exception of the Irish and English (white bread eaters), that all possessed nearly perfect teeth. This proves that the coarse, hard bread such as is made from coarse ground wheat, rye, corn, or barley flour is when properly masticated, very beneficial to the teeth.

The proper mastication of the right foods is Nature's way of preserving the teeth, but as about 99 per cent of us do not or will not eat the food adapted to this purpose, we must fall back on some artificial means to keep the mouth in a healthy condition.

The first requirement in keeping the teeth clean is a determination on the part of the individual to do so, without this state of mind any or all means are useless.

The best and most commonly used method of cleaning the teeth is by brushing with the tooth-brush, but a

great deal of harm may result from this method unless the brush is used properly and kept in a sanitary condition. The brush must be of good quality, and it must be one that is adapted to that particular mouth in which it is to be used. No one brush can be recommended for all mouths, any more than one last of shoe can be recommended for all feet. My advice would be to go to a dentist and have the teeth put in a clean, healthy condition and have him recommend a brush best suited to your mouth, and instruct you in its use.

The object in brushing the teeth is to remove all the particles of foreign matter and to polish the surfaces so that the bacteria cannot adhere to them, it is therefore important that the brush reach as nearly as possible all surfaces of the tooth. This can be done with a little practice and care. The brush should work up and down from the gum to the biting edge of the teeth, never crossways, as the cross brushing does not remove particles from between the teeth, and it injures the gum tissue.

Any of the standard tooth powders or pastes may be used as an aid to clean and polish, although very good results are obtained by using the brush with clear water.

If possible the teeth should be brushed after each meal, and it is particularly important to clean them after eating at night. Two minutes of careful brushing in the morning and at night will do wonders in preserving the health of the mouth.

BUYING HEALTH.

By DR. H. E. DEARHOLT, Director of Health Instruction Bureau
University Extension Division.

To a constantly lessening, but still far too great a degree, we care for other things far more than we do for health. Take, for example, the protection that we (the public) still give to our property against fires and to our lives and skins against the guns, knives and sandbags of thugs. If we were to compare the amounts paid out of the treasury of any city for police and fire protection with the amount paid for the health department, we should find that our "preparedness" still takes the form of a frontier town. It might be supposed from such comparison that we prefer to save our houses from fire rather than our babies from disease, or that we're more afraid of burglars and footpads than we are of the germs of scarlet fever, whooping cough, diphtheria, measles, tuberculosis, pneumonia and the other preventable diseases.

It isn't that I don't appreciate the luxury of protection from a fire in my residence, even though I am insured against financial loss, or that I don't like the feeling of safety against attack by ruffians when I'm out at night, because I do. But much more I desire for my children better safeguards against disease enemies, especially as I couldn't be compensated

for the loss of those children by any insurance company.

The real reason why we give more money for fire and ordinary police protection than we do for sanitary police protection is that the public doesn't as yet realize how much more practical, efficient disease prevention now is. When the health officer tries to tell the other authorities they commonly assume that he is trying only to increase his salary. Only the students know, as yet, how definite and practical is the knowledge of how to curb and control ravenous, preventable diseases.

When people learn more about the real nature of contagious diseases and find that they follow as definite laws as those that control business, agriculture, engineering and other sciences, taxpayers will not be willing to leave so much to chance as they now do. When more of us know that contagious disease is not a divine visitation but the result of a visitation of controllable disease germs, an insistent demand will be made to have those germs controlled.

The supply of "know-how" is already at hand to meet the demand when it comes.

Real Prevention of Venereal Diseases.

BY JOHN P. KOEHLER, M. D., DEPUTY COMMISSIONER OF HEALTH.

The primary object of every modern health department is to prevent disease. The nearer the health authorities can get to the actual cause or source of a certain disease, the easier it is to eradicate that disease.

It is well known that filth and disease are closely related, therefore every effort is made by the health department to maintain hygienic and sanitary conditions in communities under its control. Contagious diseases are checked by quarantining, regardless of the expense or loss to anyone, wherever such a procedure is considered necessary.

If some theaters encouraged, by means of pictures, acts, actors, actresses, action that would increase the number of scarlet fever, diphtheria, infantile paralysis or Spanish influenza cases, the health department would be immediately notified to that effect from a hundred sources and these places with their criminal dissemination would soon be closed.

We have now reached the time when we are ready to face the difficult problem of preventing the spreading of venereal diseases. Venereal diseases, like other infectious diseases, can best be prevented by removing the underlying causes.

Sexual immorality is directly responsible for venereal diseases. Anything that encourages sexual immorality is indirectly responsible for venereal diseases. During the last State Fair the Milwaukee Health Department gave an educational exhibit on Venereal Diseases.

The purpose of the entire exhibit was to convince the public that sexual immorality is the cause of venereal disease and the further anyone remains away from sexual immorality either in thought or in action, the better it will be for his health. About a hundred feet away from this exhibit there were other exhibits that did everything that could be done to encourage sexual immorality.

At the Health Department exhibit the advice was: "Boys, don't take a chance." At the places on the "Midway" the advice was not by words alone, but by action: "Come on, boys; have a good time. Everybody is doing it; why shouldn't you?"

In one place the city was spending money to prevent venereal diseases, at the other the State Fair Board was receiving money for permitting women to give exhibits that increased sexual desire, encouraged sexual immorality and in that way most certainly spread venereal diseases. How much better it would have been if the money spent for the venereal exhibit had been given to the State Fair Board, to be used for the prevention of venereal diseases, by not permitting these disgraceful exhibits to take place. The writer is a doctor and knows anatomy and physiology well enough to distinguish between art and "Hoochy Koochy," so that no one need to use the old camouflage and say: "Everything looks evil to the impure mind."

The City of Milwaukee has abolished the "Red-light District" but permits the "feeders" to these places to continue doing business. If it is wrong to license prostitution, it is to say the least inconsistent to license places that preach prostitution. There are theaters in Milwaukee, as there are in every other large city, that depend upon their appeal to the sexual sensuality for their patronage. Even the supposedly higher class places of entertainment cannot offer a complete program without some would-be clever actor or actress doing or saying some-

thing that makes it difficult for any self-respecting person to refrain from crying out: "Rotten."

If we want to stop the spreading of venereal diseases, we must stop the preaching of licentiousness by places of amusement. It would appear ludicrous to take food away from a man and give him an "appetizer" instead. It is likewise very inconsistent to attempt to abolish prostitutes and permit agencies to increase the demand for prostitution. Cities, like individuals, ought to be consistent.

HELP KEEP THE CITY CLEAN.

The present epidemic of influenza has focused public attention on unclean conditions of the City's streets. Though the ordinances of the City specifically prohibit the throwing of rubbish, paper and other waste matters into the street, the habits of the Milwaukeeans apparently have grown very lax with regard to the observance of this ordinance.

While it cannot be argued that the throwing of rubbish into the street in and of itself immediately causes any specific disease, it must be admitted that the dust and dirt of the streets does act as an irritant to mucous membranes and in that way paves the way for subsequent infections.

The situation is well summarized in an article which was published in the *Evening Wisconsin* of recent date, and we are herewith reproducing the same in the hope that it may find a responsive interest among the citizens of Milwaukee:

"Help keep the city clean!

"From evidences everywhere this is not being done. In every part of the city the streets, lawns, parkways, and smaller parks and triangles are littered with blowing paper in sizes from scraps to newspaper pages. Wrapping paper, torn scraps thrown carelessly from car windows, from wagons, from homes, blown from rubbish heaps and just carelessly thrown away belitter the streets, lie in the gutters, against billboards, bushes and fences. Far from a beautiful sight!

Of course, much of this is due to the dry season and the high winds, but all of it is due to carelessness. In some localities it is much worse than in others, but every part of the city is affected, the wealthy residence districts of the upper east side being as belittered as the downtown or mid-way sections.

This seems especially true of vacant lots, park triangles and gutters near apartment buildings. It looks as if the rubbish had been swept into the streets to be left there to blow every which way. Downtown there is much in the gutters swept out from stores or thrown there by pedestrians, swept into piles by the white wings to be blown again to the four winds.

In the memory of old-timers, never has the city looked so untidy through this neglect. It is bringing comment from people who like a neat city. It is not aiding the reputation of Milwaukee.

Of course, the shortage of labor for street cleaning has to do with this to some extent. But, it is pointed out, that this has nothing to do with the

causes, the carelessness, only with the lack of cleaning. The fault lies with those who sweep rubbish into the streets, who throw it into vacant lots, the individuals who throw newspapers and wrappings away.

At a time when the city is suffering from an epidemic spread by dust and rubbish, blowing about, this should receive serious attention.

A little care on the part of each individual citizen for his own acts; a checking up of employes by property owners, a watchfulness by city officials and the police would aid in checking this untidy abuse and giving Milwaukee clean streets, becoming alike to citizens and visitors and would make the city more healthful."

THE WATER PROBLEM ONCE MORE.

By GEO. C. RUHLAND, M. D., Commissioner of Health.

'Tis indeed an ill wind that doesn't blow some good.

The pollution of the city water supply through the discharge of certain industrial waste products into the lake, from which the city obtains its drinking water supply, and the extreme annoyance created for the public in genral through this practice is of too recent and unpleasant memory to need rehearsal.

Nor does it seem necessary to go into the particulars of the situation, which has been discussed quite fully

in the various reports in the daily papers.

The important thing that matters is the fact that public opinion has finally been aroused to a point where action is demanded and we have no doubt will be forthcoming.

With this fact before us we are disposed to consider the nuisance in the water situation a blessing, albeit one coming in a very unpleasant disguise.

More often than not the warnings of the health officer and sanitarian fail to get a hearing, or at all events they are not heeded.

So far as the present situation is concerned, it should be understood that after all it is but a part of an objectionable practice in which the community is the chief offender, inasmuch as all the city's sewage is discharged into the lake from which the drinking water supply is obtained.

Because the impurities so disposed of are not visible to the naked eye, is no reason to believe that the practice is without danger. As a matter

of fact this practice is beset with the greatest danger and has been the cause for repeated and dangerous outbreaks of typhoid fever and has forced the city into a situation where it must depend upon chlorine to disinfect the water supply to make it safe.

Let us hope that the day may not be far when public opinion will insist that the disposal of sewage and trade awstes into potable waters is criminal and must be stopped.

SPANISH INFLUENZA.

The present outbreak of so-called Spanish Influenza, which has become particularly prevalent in the larger cities of the east and in the military camps, is not a new disease, but is identical with influenza as we have known it in past years. In 1889 and 1890 an epidemic of influenza, starting in the Orient, spread first to Russia and from there over practically the entire civilized world. Three years later there was another flare-up of the disease. Both times the epidemic spread widely over the United States. The present epidemic, referred to as Spanish Influenza, is so referred to because of the fact that this epidemic first attracted attention in its spread throughout Spain.

The symptoms accompanying this disease are quite similar to those of the ordinary "cold." In most cases the person becoming sick with influenza, feels sick rather suddenly. There is marked weakness, pains in the eyes, ears, head or back, or generalized soreness. There may be dizziness and some patients may vomit. Most of the patients complain of feeling chilly, and with this comes a

fever, with which the temperature rises to 100 to 104 degrees F. The ordinary case lasts from three to four days and then goes on to recovery. Serious complications, however, are not uncommon, especially if the patient will get out of bed too early and expose himself to sudden chilling and other depressing influences.

In the control of this present epidemic, public co-operation is of first importance. The disease is of a highly communicable nature; therefore, to keep away from all known cases of influenza is obviously the best way to avoid contracting the disease. Since the disease occurs in symptoms of varying intensity, it is quite probable that some with the infection, or "carriers," may be about in the streets and in public places. It is, therefore, best at the present time to avoid all public gatherings and crowded street cars. Since the germs that cause the disease are spread particularly through the discharges from the nose and throat of the infected individual, a handkerchief should be used whenever there is the necessity for coughing, sneezing, or expectorating. The

"community sing" should be abandoned for the present since, unfortunately, many have rather a "moist way" of singing. This, too, obviously is a ready means of scattering the infection. Kissing on the mouth obviously is to be placed under the ban, also the handshake as a form of salutation should be abandoned. Hands are largely responsible for the transmission of communicable diseases. It is of prime importance that the hand should be clean that conveys food to the mouth, and it is best at all times to get out of the habit of bringing the hands to the mouth.

Needless to say, bodily health should be kept at its best. By taking plenty of fresh air, both day and night—this means keep your bedroom window open—sufficient of plain but nourishing food, and sufficient sleep for the recuperation of the body strength, are three essentials to keep the body in the best condition to throw off disease. Should, in spite of these preventive measures, the disease become manifest, the patient should heed these symptoms at once and promptly go to bed and call a physician. Usually attacks are accompanied by considerable depression.

It is highly unwise, therefore, for the patient to leave his bed or expose himself to unnecessary physical strains or depressing influences until fully recovered. Serious complications, such as pneumonia, are largely due to failure to recognize this fact.

Industry will do well to eliminate from office or workshop every case exhibiting symptoms of "cold." It will be economy to do so, since every single neglected case may develop many more cases that may seriously handicap the work of office and workshop.

Where it becomes necessary in homes to be in contact with cases, the nurse or attendant should protect her nose and mouth by wearing a gauze mask, which can easily be constructed by using several layers of surgical gauze and securing this by means of tape. Needless to say, all discharges from the patient must be carefully disinfected or destroyed, and the attendant must scrupulously keep her hands washed clean.

If the public will learn to follow these instructions there is little to fear from the spread of the epidemic in our city.

EARNINGS AND INFANT MORTALITY.

That the chance of life of the baby grows appallingly less as the father's earnings grow smaller is shown by the combined rebults of the bureau's studies of infant mortality among 1000 babies in eight American cities—Johnstown, Pa.; Montclair, N. J.; Manchester, N. H.; Brockton, Mass.; Saginaw, Mich.; New Bedford, Mass.; Waterbury, Conn., and Akron, Ohio. One fourth of all the

fathers earned less than \$550 a year; in these families every sixth baby died. Only about an eight of the fathers earned \$1,050 or more; of their babies only one in sixteen died. The rise of prices and the disorganization of social and industrial life with the war accentuate the importance of this persistent relation of income to infant mortality.—Bulletin, Children's Bureau.

THE HYGIENE OF INFANCY.

From "Personal Hygiene"—Pyle.

SLEEP.

The newborn baby should sleep from eighteen to nineteen hours a day. As it grows it needs less and less sleep. By the time it is one year old it needs from fifteen to sixteen hours' sleep; when from two to three years, twelve to thirteen hours; when four to five years, ten to twelve hours. Regularity in sleeping hours may be acquired by careful training from the beginning of life. If a baby has been well trained and is not sick, it will sleep and will not fret at night. It should be properly prepared for bed—fed, made comfortable, clean and dry, and then kept quiet for an hour. At a certain time each evening it should be placed in its crib without being rocked or walked, and not taken up again. After opening the window for ventilation and putting out the light, the mother should leave the room, allowing the baby to fall asleep alone.

At first the baby should go to bed about 6 P. M. and wake only once or twice in the night for nursing. After the age of three months it should be put to bed at 6 to 7, after nursing, be fed at 10 or 11, and not fed again until 6 or 7 the next morning, after which it may sleep again. To insure a better night and rest, it is advantageous if it is awake an hour before bed-time. If it is restless without feeding at night, the substitution of water in a bottle at the same temperature as the milk will soon break

the habit of undue wakening. Night-feedings are unnecessary after the fourth month. When the baby is a few months old, it will limit its sleep in the day to a morning and an afternoon nap; later to a morning nap of from one and a half to two hours, and only a short nap or none in the afternoon. For the nap the baby should be undressed and put to bed or, preferably, kept out-of-doors. From one to two years the baby needs the morning nap of two hours; from two to three years, one of but one hour's duration.

The baby should be taught to lie on its side or stomach, rather than on the back. Perfect quiet should be observed while it sleeps. Before putting the baby to bed, the bed-clothing should be pulled down for a half hour or longer and the sheets warmed, except in summer.

Bed-clothes fasteners, such as elastic attached to the covers by a clamp and fastened to the crib by ribbon, are useful in preventing the baby from becoming uncovered. The baby should always sleep alone and, at least after it is a year old, it should have a separate room. The length of time it sleeps depends somewhat upon the temperament and the amount of noise or quiet around. An infant should always be very gently aroused when it is feeding-time and should not be allowed to lie in bed after thoroughly awake.

Bulletin of the Bureau of Vital Statistics.

GEORGE E. ADAMS, Deputy Registrar.

July-Aug. 1918.

Annual Death Rate per 1000.....	10.58	Population U. S. Census.....	373,857
Annual Birth Rate per 1000.....	27.17	Population, est., 1918.....	445,000
Annual Death Rate, Males.....	5.34	Annual Death Rate, Females.....	5.24
Annual Birth Rate, Males.....	14.21	Annual Birth Rate, Females.....	12.96

Deaths Recorded	1155	Births Recorded	3023
Marriages	836		

BIRTHS.

SEX	COLOR
Males.....1580	White3017
Females....1443	Colored 6

BY WARDS

REPORTED BY	
Physicians	2339
Midwives	600
Others	84

NATIVITY OF PARENTS.

	Father	Mother	Both
	Parents	Parents	Parents
Milwaukee	132	192	290
Wisconsin	212	369	764
United States	212	206	168
Germany	180	115	119
Poland	54	24	161
Austria	36	32	110
Bohemia	1	3	7
Sweden	10	3	0
Italy	6	2	83
Roumania	1	0	1
England	15	7	6
Holland	0	1	2
Norway	5	8	4
Slavonia	0	1	3
Hungary	9	7	94
Russia	50	11	166
Canada	14	7	1
Greece	3	1	17
Unknown	39	3	1
Ocean	0	0	0
Elsewhere	26	11	25

First	103
Second	68
Third	91
Fourth	51
Fifth	77
Sixth	112
Seventh	93
Eighth	146
Ninth	127
Tenth	76
Eleventh	132
Twelfth	116
Thirteenth	128
Fourteenth	203
Fifteenth	52
Sixteenth	34
Seventeenth	136
Eighteenth	40
Nineteenth	87
Twentieth	134
Twenty-first	130
Twenty-second	95
Twenty-third	107
Twenty-fourth	138
Twenty-fifth	102
Hospitals	445

MARRIAGES REGISTERED.

	Groom	Bride
Oldest	71	65
Youngest	17	15
Widowed	73	70
Divorced	30	45

	Groom	Bride
White	835	835
Colored	1	1
Others	0	0
Total.....	836	836

NATIVITY.

	Groom	Bride	Both
Milwaukee	33	63	77
Wisconsin	61	143	287
United States	87	69	32
Germany	45	23	19
Poland	22	7	8
Austria	19	11	19
Bohemia	3	0	0
Sweden	2	1	0
Italy	4	0	4
Roumania	0	0	0

	Groom	Bride	Both
England	5	0	1
Holland	0	0	0
Norway	2	0	0
Slavonia	0	0	0
Hungary	6	6	10
Russia	23	8	30
Canada	5	0	0
Greece	6	0	5
Elsewhere	9	1	0

AGE

	Groom	Bride
Under 25	73	27
25-35	261	486
35-45	354	230
45-55	98	68
55-65	39	18
65-75	5	6
Over 75	1	1
	0	0

RESIDENCE

	Groom	Bride
Outside State	51	25
Outside City	83	65
Married elsewhere	0	0

CEREMONY.

By Judges	91
By Justices	39
By Ministers	706

How Much Are You Willing to Pay for Health?



*Comparative per capita cost for City Departments
based on the figures given 1918 Budget.*

School Board	-	-	\$6.78
Public Works Department	-		6.77
Fire Department	-		2.25
Police Department	-	-	2.04
Park Board	-	-	.95
HEALTH DEPARTMENT			.62
(including institutions)			

INFLUENZA

Influenza again has developed a considerable number of cases in our city.

Just how many cases we shall have and how serious the situation will become, will depend largely upon what you are willing to do.

If you will follow the advice given below and see to it that others will do likewise, this will go a long way in protecting yourself, your family, and the community against the epidemic.

To Control Influenza

Keep away from all cases of influenza and "colds."

Avoid all public gatherings and crowded street cars.

Use your handkerchief if you must cough, sneeze or expectorate.

Keep clean; wash your hands before eating.

Get plenty of fresh air day and night. Eat plain but nourishing food and take sufficient rest at night. Don't worry.

Give prompt attention to oncoming illness. Go to bed at once and call a doctor.

Do not consider yourself recovered until your doctor tells you so. Serious complications are largely due to neglect to do so.

Milwaukee Health Department

Sixth Floor City Hall

Phone Broadway 3715

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FEB 22 1919

Bulletin

of the Milwaukee

Health Department

*Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.*

JAN. 1919.

Vol. 9, No. 1.

TO RAISE the Level of Na-
tional Health is One of the
Surest Ways of Raising National
Happiness.

—LECKEY.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIDGE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS MAXINE BIEBESHEIMER, Supervisor of Nurses.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M., 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

HEALTH DEPARTMENT FACTS YOU SHOULD KNOW

(Information about various divisions will be given in this space each month.)

MEDICAL INSPECTION OF PAROCHIAL SCHOOLS.

Central Office—Sixth Floor, City Hall.

The Health Department makes medical inspection of all parochial schools in the city. There are seven physicians and an eye, ear, nose and throat specialist employed in this work. Thirty nurses are also employed, who visit the children in their schools and make visits at the homes. The medical inspectors give no treatment to children, but examine them to determine what defects exist and to advise

the parents concerning the correction of these defects. They also make physical examination of children attending parochial schools.

The Dental Clinic is open each week-day from 9:00 a. m. to 5:00 p. m., with the exception of Saturday, when it is open from 9:00 to 12:00. Free dental attention is given to children whose parents are not able to provide needed attention. Parents who desire this attention for their children should make application at the office in the City Hall. The dentist will not receive patients at the clinic who do not have an appointment card made out from the Central Office.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

JAN. 1919

PUBLIC HEALTH AND DEMOCRACY.

BY DR. CHARLES J. HASTINGS, COMMISSIONER OF HEALTH, TORONTO, CANADA.

The war has demonstrated the value of man-power, whether in war or in peace. Every nation has been expecting every man to do his duty, and now that the war is over every man will expect every nation to do its duty. He will expect a democracy that will enable him to develop a sound mind and body both for himself and for his family. Health is a prerequisite to the enjoyment of life. We want life more abundant. To make the world safe for democracy we must first make it healthy. In this respect we have not tried to make the world safe for democracy. Now that the black cloud of war that has been lowering upon our housetops for the last four years or more has dispersed, it remains for us to play our part in medical mobilization and in the enlisting in our contest with our invisible foes of all physicians specially trained in preventive medicine.

There is evidence on all sides of an awakening of the social conscience to the appalling condition existing today, with poverty on the one hand and enormous wealth on the other. With modified slavery on the one hand and luxurious idleness on the other. Every nation that permits social conditions to exist that

make it impossible for them to be properly fed, clothed and housed, so as to maintain a high degree of physical fitness, and that endorses a wage that does not afford sufficient revenue for the home, is trampling a primary principle of democracy under its feet.

Will any of the democracies of the day stand the test? Let us examine the crowned democracy of Great Britain. Thirty thousand people in England own and control over 98 per cent of the land and capital of the island. Just previous to the war it was estimated that 700,000 men in England were constantly out of work and 800,000 were practically paupers. Is this democracy? In the United States and Canada less than one-half of 1 per cent of the people own and control nine-tenths of the wealth. Three million children go to school either without breakfast or with insufficient food for their breakfast, and at the same time we find in this country thirteen families with incomes ranging from two and a half to sixty million dollars—and this is what we call democracy. The efficient solution of social problems constitutes the very foundation of public health administration.

CARE OF CHILDREN'S EYES.

From "Personal Hygiene"—Pyle.

The question is often asked, "When shall a child begin school?" This, of course, depends entirely on the child's health and the condition of the eyes. If the eyes are defective and show a great tendency to astigmatism or myopia, the mental education should be postponed and systematic study should not be started until the person is twelve years of age, when the ocular tissues become more resistant. In the meantime the child should be instructed judiciously at home or in shortened courses at school. Outdoor exercise and properly assigned manual labor should be urged. If the child is of poor parentage and must go to public school, it will be better to postpone the schooling for a few years and enter later a class of children below its age, explaining to teacher the reason of the deficiency in education.

Ordinarily a healthy child with normal eyes may begin school at from eight to ten years of age. It then arrives at systematic study after its ocular tissues are well formed. Of course, if the proper precautions, of which we have much to say later, are practiced, the entrance age may be lowered somewhat. No child of tender years should be encouraged in prize competitions; in fact, it would be better if there were no grading in the primary schools other than by term average. The ambitions of parents sometimes lead to ruin of a child's eyes and health.

Continuous close work is most detrimental to the eyes of children. Sometimes parents allow the evils of school-life to be repeated at home. No provision is made for proper lighting and seats. Children are often allowed to read story-books and novels as much as they please, and until late at night in a poorly lighted room or in front of a fire-place, and often in stooping or recumbent positions. All this is wrong. Such children are generally over-ambitious in school, and not only should be compelled to take intervals of rest from close work during the day, but also should be discouraged from using their eyes in reading, writing, or sewing at night. If some home study is necessary, the proper lighting, chairs, and desks should be provided.

The pernicious influence of modern school-life upon the eye as well as upon the general health is not sufficiently recognized by parents and teachers. Nearly all knowledge is acquired to some extent by the use of the eyes, and if the proper hygienic precautions in vision are not heeded, the evil effects of eye-strain upon the whole body may be most serious. With the advance of civilization there is a constant increase of visual defects and of general physical degeneration among school-children. The causes are many. The most prominent are: imperfect construction of school-houses, imperfect lighting, foul air,

crowding, poor ventilation, long hours of continuous application at close work in school and necessary extra preparation after school-hours, frequent and trying examinations, and poor print and paper in school-books.

Until recently there has been a disregard on the part of public authorities and educational chiefs of the advice of physicians in matters of public hygiene. Happily this is being overcome through the efforts of the intelligent mass of the community and the patriotic efforts of the physicians themselves, who have often given advice and time willingly and without compensation. We hope soon to see the time when all

persons seeking election as school-directors, educational trustees, superintendents of schools, etc., will be subjected to a non-partisan examination or be compelled to show qualification in the principles of school-hygiene.

There should also be salaried medical inspectors, controlled by prominent chiefs, to whom they will be responsible for the performance of their duties. These physicians should systematically examine the eyes as well as the general health of every school-child before entrance and during the tender years of school-life. It is essential that the teachers should be instructed in all the elements of school-hygiene.

TAKING INVENTORIES.

This is the time of the year when business houses are taking an inventory of their stock to determine the profits or losses of last year.

The more progressive business man will know from day to day whether he is making or losing money and for him an annual inventory of stock on hand is not absolutely essential.

Whether at the end of each day or at the end of each year, we will all agree that it is necessary for every business to keep a close check on its assets and liabilities, if it wishes to escape bankruptcy.

If it is advisable to take stock of material things to prevent serious consequences, how much more necessary to take stock of your health. If you have a daily cost system that you apply to your business of health, it may not be necessary for you to now take an annual inventory of your supply of health. We fear

however that most people only take an inventory of their health when on their way to the hospital.

This is the season of inventories. Get busy! If you can't do it alone, get a physician to assist you.

What is your blood pressure?

How are your kidneys?

Have you been over-working your digestive apparatus?

Is your memory as good as it was a year ago?

Are you able to control your temper as well as you did when first married?

Are you losing or gaining in weight?

Are you pessimistic or optimistic?

Are you "cranky" and irritable?

If you find that your health has suffered great losses during the past year, learn the cause and remove it immediately, before you go into physical or mental bankruptcy.

How to Americanize Our Foreign Population.

BY JOHN P. KOEHLER, M. D., DEPUTY COMMISSIONER OF HEALTH.

No doubt many readers when they see this heading, will question the right of a Health Bulletin to discuss what appears to be a political or economic question. We hear and read a great deal at the present time concerning Americanization, but few people seem to realize what Americanization really consists of. The consensus of opinion seems to be that Americanization and education are synonymous.

The prevailing idea is to teach the foreigner to read and write the English language, and then you have him thoroughly Americanized. It may be easier to Americanize a foreigner who is familiar with the American language, but it takes more than education to develop in this individual, American standards of living, American ideals and American patriotism.

We compel children to attend school until they are 14 years of age and have passed the 5th grade, when they are permitted to go to work in order to help make living wages for the family. Teaching a child to read and write and then sending it to work in a place, where it will be physically, mentally and morally neglected, certainly doesn't appear a safe procedure in attempting to make loyal and useful American citizens.

To be a true American requires more than education. It requires enough of an income to give proper food; to permit him to wear clothing that will make him look like an

American; to allow him to live in a home in which no American would be ashamed to live; to encourage him to call a doctor when ill, and after having all of these necessities, to have a little left for recreation and a bank account.

It doesn't take long for an ignorant foreign prospector to become Americanized after he strikes a gold mine. He may not be able to write his name, nevertheless, he is soon a member of the most exclusive American social set.

"Education" is the cheapest way for the employer of labor to Americanize our foreign population, but not the most efficient. The most certain way is to pay the head of the family sufficient wages to permit his family to adopt American standards of living. Such a man doesn't need to read the daily newspapers to be convinced that he is living in a great country, because his happy family convinces him of that fact. Such a man is immune against arguments by agitators or Bolsheviki.

A child may live in a beautiful home, but if it hasn't enough to eat or enough clothing to wear, it cannot become enthusiastic about its beautiful house.

We cannot expect our foreign element to become enthusiastic about our beautiful country, if they are suffering from hunger and cold.

What has this to do with health? Health is purchasable within certain limitations. Poverty is the greatest

problem in public health. It matters not whether poverty is a cause of sickness, or sickness is a cause of poverty, the two are closely related. Anything that will give a family good food, warm clothing and sanitary housing, will promote the health of that family. Healthy individuals are not the ones that practice or preach disloyalty or Bolshevism, only those that are mentally warped by physical infirmities, do that.

When the foreigner receives a sufficient wage to maintain the health of his family, he is more apt to become Americanized, than if he is compelled to learn to read and write the English language.

We therefore believe that a modern Health Dept. if given strong legal and financial backing can do more to Americanize our foreign population than any educational institution.

THE NATIONAL HEALTH.

The nation has been brought close to the subject of public health by the great loss of life from the epidemic and through the war. We have seen the great value of periodic physical examination by the rejection for physical impairment of over 2,000,000 young men by army and navy surgeons. The most of these impairments can be corrected. We also have 4 million young men who

have been taught the value of sanitation and healthful living habits by the army and navy requirements, many of whom will carry this message home with them.

The nation should now be ready to take up in earnest an advanced public health program. There is urgent need of guarding the vitality of our race.

THE HYGIENE OF INFANCY.

FROM "PERSONAL HYGIENE."

EXERCISE.

The new baby should be allowed to kick freely; this will give all the exercise required. When from two to three weeks old, the baby may be carried on a pillow for from ten to fifteen minutes two or three times a day; when one month old the pillow may be discarded, the head and neck being carefully supported.

To prevent curvature of the spine, the child should be carried sometimes on one arm and sometimes on the other. From three to eight

months it may be seated upright on the arm, the head and back being supported by the other hand. Then from four or five months of age it may be able to sit up for a short period, with a pillow supporting the head and back. A few months later it may be able to sit up without support. At the age of from nine or ten months it will probably begin to creep. From the time it is three months of age, it is advisable to put him on a thick blanket or mattress in a place that is warm and free

from draughts. A clothes-basket or padded box is useful when the baby begins to stand up and try to walk, usually at about twelve months. He should, however, not be urged to stand or walk.

The baby should be taken out-doors every day in favorable weather, unless it is sick; at first for from ten to fifteen minutes only, later for a longer period. At first the infant is carried in the nurse's arm, but after two or three months it may be taken out in a perambulator. In midwinter it is better not to take the child out until it is from one and a half to two months old, and only on sunshiny days. If the hands or feet become chilly, it should be taken inside. A spring or summer baby can be taken out-of-doors when it is from ten days to two weeks old. Autumn or winter babies, bundled up well, may be carried for half an hour or longer in a room with the windows wide open.

The perambulator should have a shade, with a dark lining of green or brown, to shield the baby's eyes.

The baby-carriage should run smoothly and be provided with a soft warm bed and pillow with warm covering. It should have a strap and a brake. When the baby is old enough to sit up, its back and head should be supported by pillows.

The baby should never be trotted on the knee and never lifted by the hands or arms. It should not be over-excited by too much talking or playing.

Even before the baby is three months old it may be encouraged to have regular evacuations. Shortly before either a bowel or bladder-movement is expected, it is advisable for the mother to place a small receptacle between her knees and place the baby over it, making at this time some special sound. When the child is able to sit up with support it may be held over the nursery chair, always at regular intervals. Regularity is of utmost importance. When a year old, there should be an evacuation of the bladder at the same time every evening before going to bed, in order to obviate the probability of wetting the bed during the night.

According to data furnished by the U. S. Public Health Service, Milwaukee has the best record of any city having a population of 200,000 or more, as regards the mortality from influenza-pneumonia, and stands in fourth best place of any city with a population of 100,000 or more, so far as general mortality is concerned. Pretty good! But let us not neglect to exercise those personal precautions which served us during the time of the epidemic.

PATENT MEDICINES

We become almost discouraged at times in our effort to safeguard the health and the pocketbooks of the citizens of Milwaukee, by opposing the use of patent medicines.

In our fight we are at a distinct disadvantage. The patent medicine company makes enticing claims in our daily newspapers, which are read by almost every citizen and it is obvious that the Bulletin of the Health Dept., which reaches comparatively only a very few people, and then only weeks after the patent medicine advertisements appear, cannot do much harm to the patent medicine man who has reaped his harvest, or much good to the buyer who has already been stung.

TANLAC

If the public were only intelligent enough to realize that the more worthless or even the more harmful a patent medicine is, the more newspaper space and the more testimonials are necessary to sell it.

The only time any drug of any kind ought to be taken, is when you know what your ailment is, and you never can expect to make your own diagnosis, by what you read in patent medicine advertisements.

During the last few days the Milwaukee papers contained the following: "Demand for Tanlac Breaks

Records."—"Fame of Tanlac spreads over entire nation."—"Ten carloads order by big western firm."—"75,648 bottles sold in Denver"—(no doubt due to prohibition)—

"Tanlac to be sold over entire state." Space will not permit us to mention in detail the many claims made by "G. F. Willis international distributor of Tanlac", but we will take a few paragraphs from a pamphlet issued by the Press of the American Medical Association on "Tanlac". "Tanlac is a product of the Cooper Medicine Co., Dayton, O. The controlling spirit of the Cooper concern seems to be one of L. T. Cooper, who has been quacking it for many years. "Tanlac" is a skyrocket in the pyrotechnics of fakery. It is at present making a brave display with much noise and many sparks; the stick will come down in due time. Tanlac is another of the

increasingly popular alcoholic nostrums that presumably fill a much felt want—want, not need—in those parts of the country where Demon Rum has been driven into the tall timbers.

The 16 per cent alcohol gives it the "kick" that makes a fellow feel good and ought to fill a long felt want in dry counties.

The Holyoke Daily Transcript of May 11th contained two items. One of these was an advertisement stating that Mr. Fred Wick has been relieved of stomach trouble and had gained ten pounds in weight since taking "Tanlac". The other item under the ominous black-faced heading "Funerals" advised the readers that the funeral of Fred

Wick was held this morning from his home. The death certificate showed that Fred Wick died of cancer of the stomach two days before the testimonial was published.

We do not expect that the recounting of these damning facts will result in the withdrawal of Tanlac from the market. It is hopeless to expect that the men who are exploiting it and the newspapers that are sharing the profits of its sale will be in the least affected by any facts that may be brought out regarding Tanlac. All that can be hoped is that by repeated publication of such instances as these the public and also the decent advertisers of honest and meritorious products will at last be aroused to the point where it will cost the newspapers more to accept advertisements of such humbugs as Tanlac than to reject them. When that time comes, and commercial expediency accomplishes what moral responsibility failed to accomplish, Tanlac and its congeners will be no more."

Since the above article has been set up in type, this department has had opportunity to investigate the first of local testimonials. The particular testimonial in question appeared under date of January 24th and purports to recite the experience of Col. Frank M. Wade, a civil war veteran an inmate of the National Soldiers' Home, with Tanlac. The matter was referred to the Surgeon of the National Home and we quote herewith from the Surgeon's letter:

"I had a conference with him (Col. Wade) today (Jan. 28th) when he stated that he used four bottles (Tanolac) and *could not* tell whether it would do him much good until he had finished six.

When asked about the testimonial he stated that the language in it was the suggestion of the salesman and that they had given him two bottles gratis for signing it."

Two bottles gratis for a testimonial seems to us a pretty cheap price to pay. Yet it may be all that it is worth.

THE FAMILY AS A HEALTH UNIT.

A river cannot rise above the level of its source; neither can the health of a community rise above the average of the families which compose it.

Healthy families make healthy communities, and healthy communities make healthy nations.

National health can be improved and secured only by raising the standard of family health.

All sanitoric and specialized health effort will be in vain unless we improve the home to which the patient must ultimately return.

To raise the average understanding of personal hygiene and sanitation in the family must be the next big effort in the national health movement.

If I can read well and have weak lungs if I can write well and have kidney trouble; if I can figure well and have anemia:—how much are the three R's worth to me?

WAR ON VENEREAL DISEASE.

United States Public Health Service.

Your whole community will be at the station "when the boys come marching home." You are planning to honor these men with parades and celebrations of all kinds. Are you making sure that the profiteers of vice are not planning to take advantage of the days of festivity to dishonor them before they get settled again in the normal ways of life? Are you sure that demobilization will not mean demoralization?

When men and girls are changing their occupations and breaking with old ways of life, when war disciplines are being removed and when spirits are buoyant, the greatest temptations to self indulgence occur. Cities and towns throughout the country face now the most important crisis—the biggest emergency yet encountered in the fight against venereal diseases.

Before the war most physicians and public health officers knew that gonorrhea was every year causing thousands of cases of blindness among infants, countless surgical operations on women, and sterility in both men and women; that syphilis was being transmitted to offspring causing physical and mental defectives, that it was a prolific cause of locomotor ataxia, paralysis, paresis or softening of brain, insanity, miscarriages, diseases of the heart, blood vessels and vital organs. But people generally did not know these things and few remedial measures were

taken. The war opened our eyes. The reports of draft boards and camp surgeons revealed, for the first time, clearly, the menacing seriousness of the venereal problem and the failure of our pre-war attitude toward the whole question.

Europe, for the first years of the war, evaded the problem and suffered terribly in incapacities at the front and sickness behind the lines. Our military authorities threw aside evasion and prudery and attacked venereal diseases directly. The old shams and fakes about the "sex necessity" and the need of licentious pleasure were thrown into the discard. From first to last the Government maintained the position accepted by the best medical authority: viz., that continence is entirely compatible with health, and that irregular sex intercourse with prostitutes is the most prolific cause of venereal disease. The denizens of the underworld were driven out of the zones around each army camp and naval station; all the men in camps were given extensive instruction; those exposed and infected were given prompt treatment; and various co-operating agencies furnished interesting, wholesome recreation.

This program brought results. The venereal rate was lowered below that of any army of any nation in the history of the world. The war showed America not only the prevalence and seriousness of venereal diseases; it showed how

and where to attack and conquer them.

The examinations of draftees showed that five men came into the army with venereal disease to every one who contracted it after he was in the army. And the one who contracted it in the army, probably, was infected in a civil community near camp over which civil authorities had control.

Venereal disease, then, is not to be attacked as a war epidemic, but as a civilian problem and a peace problem. The protection of the returning soldiers and sailors is your immediate responsibility.

Is your city accepting its reconstruction task?

What can you do?

You Can Keep Your Red-Light District Closed and Suppress Commercialized Prostitution of all Kinds. If your city or town still tolerates a so-called segregated district your first job is to close it. As a method of controlling vice the "red-light" district never had a sound leg to stand on: now the war has removed its last crutch. The military authorities, who sought only clean men for fighting, condemned it unqualifiedly; vice commissions in over fifty cities have condemned it after complete investigation; and experience in Europe shows plainly that the regulation and medical examination furnished are a farce.

The hasty examination given most prostitutes often does not reveal existing disease or prevent infection the next hour after examination. A segregated district does not segregate all prostitutes—only those unfortunate women with the least personal attractiveness and

the most diseased bodies. It creates a public, official market for the selling of diseases to custom from everywhere, aided often by the false medical guarantee that no disease exists. It does not segregate vice; a large part of it goes on clandestinely out of bounds. It surely does not segregate disease.

When the military zones are removed from federal control there will be pressure brought to bear to re-open the segregated district, or to wink to clandestine vice which has been rigidly suppressed under military order. But if prostitutes carried disease last week, they carry it next week. In war or peace the segregated district is a synonym for crime, venereal disease and needless waste of human life.

Abolishing the red-light district is not the end of the clean-up of the community. Boarding houses, assignation houses, cafés, dance halls, massage parlors, amusement parks, and for-hire automobiles are the refuges of clandestine prostitution. They must all be watched and watched continuously. Legislation is needed in some cases to control these places. What is effective is not a spectacular raid now and then but constant vigilance on the part of public officers and citizens associations. Each attack on prostitution, by driving it more and more to cover, reduces the number of individual exposures to venereal diseases.

Such a program of suppression often causes some sentimental ignorant persons to rise up and say, "you are fanatical", "you are hounding the poor, unfortunate prostitute", or "the lid ought to be

tipped up a little so that everybody can have a good time and so that business will be better." These are absurdities. Prostitutes themselves, after they have had a glimpse of decent life in a detention home, say, that "there is no greater wrong you can do a girl than to allow her to remain a prostitute." Only in trashy novels and "movies" is the prostitute's life a rosy one. In reality, to quote her own words, "it is hell." What kind of good time do you create for recreation-loving men and women by "tipping up the lid?" It may be a gay time for a night, perhaps, and then mornings-after and months-after of disaster and disease. An open town will mean more business for some doctors, hospitals, and undertakers. It means prosperity for the pimps and landlords who live on the earnings of these women. But for legitimate business, it means higher taxes, lowered efficiency, less buying power—an infinitely poorer community.

You Can Provide Facilities for Easily Accessible and Prompt Treatment of Venereal Diseases. Diseased prostitutes are the most dangerous carriers. They must be quarantined and the community safeguarded against their return as prostitutes, first, by means of permanent segregation of the feeble-minded and, second, by medical treatment and industrial education for the others.

Hospitals should be persuaded to admit venereal cases so that the number of carriers at large will be minimized.

Clinics handling venereal cases

should be established in population centers. This is now rapidly being done by the state boards of health and United States Public Health Service co-operating.

Quacks should be put out of business by advertising agencies and others. The best druggists are joining in the movement inaugurated by the United States Public Health Service, to refuse to sell venereal disease nostrums and to refer enquirers to reliable physicians or clinics.

All cases of venereal disease should be made reportable by name or number to boards of health. Patients who refuse to follow prescribed regulations to prevent exposing others to the disease should be put in quarantine. A majority of states already have laws or health regulations with such provisions. They are as necessary in fighting venereal disease as in combating any other contagious disease.

You Can Educate People With Regard to Venereal Diseases and Sex Matters. In army camps this proved to be a very important part of the venereal disease prevention program. Thousands of personal instances testify to the large part that ignorance has to play in the downfall of girls and infection of men. Get in touch with your state board of health and co-operate in their educational campaign.

You Can Provide Wholesome Recreation for All. In the army camp the soldier's life was filled with hard work and interesting healthy diversion. This proved an important factor in preventing patronage of vicious amusements. All

young men and girls need companionship, excitement and recreation. The contemptible profiteers of vice exploit this natural desire. Outdoor play and sports, attractive lounging places, open houses and clubs, organized athletics, gymnasiums, reading rooms, fraternal activities, community singing, good theaters at reasonable prices, well supervised dancing; these are the successful and effective substitutes for the saloon and brothel.

How do you stand on this program? It is no easy task. But venereal diseases have been controlled in other towns and they can be in your town. Mayors and chiefs of police, who have done their duty in war time, are not likely to relax their efforts now. If they do, they may be quickly aroused by citizens like you.

Clinics, hospital wards, reformatories, homes for the feeble-minded, education and recreation cost cold, hard cash, but it can be proved that they are much cheaper in dollars and cents than the enormous industrial and human waste caused by the spread of venereal diseases.

This is not a job for sentimentalists or fly-by-night enthusiasts. It is a task for hard-headed business and professional men and capable women. It is a job for citizens who feel responsible for their com-

munity and their nation in times of peace as well as war.

With war's final end, many war buildings, war jobs and institutions will go to the scrap heap. But every item in the program of venereal disease control is as necessary to successful peace as to successful war. Don't scrap your patriotism and community spirit in this matter. Make your blows knockouts against vice.

There should be no peace with prostitution, no truce with the red-light district, no armistice with venereal diseases.

Unconditional surrender is the Government's demand from this enemy at home.

FREE PAMPHLETS

Pamphlets explaining the government's campaign against venereal diseases and presenting the true facts of sex in a wholesome manner will be sent to any address free.

- Set A. For young men.
- Set B. For the general public.
- Set C. For boys.
- Set D. For parents of children.
- Set E. For girls and young women.
- Set F. For educators.

Write to The Treasury Department, UNITED STATES PUBLIC HEALTH SERVICE, 228 First Street, Northwest, Washington, D. C.

On account of lack of funds no Bulletin will be issued for the month of December, 1918.

HOW TO LIVE.

LESSON I.

THE AIR WE BREATHE.



Air is the first necessity of life.

We may live a week or longer without taking any solid food; about three days without water; but only about three minutes without air.

All vital processes of the body are dependent upon the air we take into the lungs when breathing.

To breathe properly the air should be taken in through the nose, so that it will be filtered, warmed, and moistened before it gets to the lungs.

Chest and abdomen should be free from constrictions so that the lungs may expand properly.

Walking is the best exercise to stimulate breathing.

The out-of-doors air is the best air provided it is free from dust, smoke, fumes, and gases; get all you can of it both by day and night by keeping windows partially open.

Air in closed rooms, offices, or workshops, soon becomes impure, and unless frequently changed by ventilation produces impoverished blood and poor health.

If you want good health and keep it, practice deep breathing.

TAKE TWELVE DEEP BREATHS DAILY.

Milwaukee Health Department.

SOME THINGS THE WAR HAS DONE FOR US.

It has sharpened and expanded our sense of justice.

It has revived observance of our first law—self-defense.

It has awakened us to our duty to the family of nations.

It has unmasked shortcomings hitherto buried in our conceit.

It has given us a much needed lesson in unselfishness.

It has curbed our national sin of wastefulness.

It has shown us our friends in the hour of national peril.

It has offered us a new lesson in co-operation.

It has helped to level artificial class barriers.

It has aroused, unified, enriched American brotherhood.

It has revitalized and ennobled our national soul.

It has made us better citizens, better humans altogether.

It has brought we hope, the dawn of universal peace.

—EXCHANGE.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

FEB. 1919.

Vol. 9, No. 2.

***E**VERY person has a part
in the protection of the
public health.*

U. S. P. H. S.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIGDE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS MAXINE BIEBESHEIMER, Supervisor of Nurses.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

ORDINANCES YOU SHOULD KNOW.

SPITTING ON WALKS AND IN BUILDINGS:

Gen. Ord. 1906. Chap 15,

Sec. 33 and 34.

No person shall spit, expectorate or deposit any sputum, spittle, phlegm, tobacco juice or wads of tobacco upon the floor or stairway or any part of any theater, public hall or building, or upon the floor or any part of any railroad car or street car, or any other public conveyance in the city, or

upon any sidewalk abutting on any public street, alley or lane; and it is hereby made the duty of the owner or agent of every theater, public hall or building in said city to provide every such theater, public hall or building with a sufficient number of spittoons or cuspidors.

Penalty—Not less than (\$1.00) nor more than (\$5.00) and costs, and in default of payment, House of Correction for not more than five days.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

FEB. 1919

WASTED EFFORT.

By GEO. C. RUHLAND, M. D., Commissioner of Health.

It is a comforting fact that in practically every emergency willing hands are found to help out.

The war and the recent influenza-pneumonia epidemic abound in instances where private initiative has furnished funds and helpers for work for which governmental agencies, overwhelmed by sudden demands or handicapped by red tape, found themselves unable to act promptly and effectively.

The services rendered by these volunteer relief organizations, therefore, must be acknowledged as of the greatest benefit to the country and as on par with the best service of those whose activities were placed in the more heroic settings of the first line trenches.

It was, of course, to be expected that under circumstances which demanded immediate action, considerable duplication of effort resulted.

Now that the crisis has happily passed and time for deliberate planning is available, care must be taken to make every effort count.

The country has shouldered heavy tax burdens; to offset this, so far as

possible, work must be so planned that every dollar goes to where it does most good.

Before volunteer agencies approach private charity for contributions it should be well ascertained if agencies established and supported by public taxation cannot be made to carry the responsibility.

It will always remain the prerogative of private enterprise to try out the new; but when the experiment has been made and its value as a public need has been proved, then should such service be made a public responsibility.

Too often private enterprise is loath to give up its activity even when public agencies have taken up the work. That means an unfair burden upon charity.

There is need for more definite organization and co-ordination of the work of the numerous relief agencies that have come into existence in this country.

There is too much duplication of effort at present, and duplication means waste of effort.

Money spent for patent medicines is worse than wasted.

INFLUENCES OF HEREDITY, EDUCATION AND ENVIRONMENT ON THE NERVOUS SYSTEM.

By J. W. COURTNEY, M. D.

At the present day we frequently hear the term "born degenerate" used to designate some unfortunate who happens to be the possessor of a high-arched palate, misshapen ears, or an assymmetric skull, and who, under stress of circumstances, betrays some mental or moral obliquity. The argument is that Nature while inflicting upon this individual outward stigmata of her freakishness, has been equally unkind in the matter of moral and intellectual endowments, and that he, in sinning against well-recognized laws, is simply the victim of his own vicious organism. To argue thus is fallacious in the extreme, for it throws a most unwarrantable burden upon Nature, and leaves absolutely nothing to the account of two factors which are of vast importance in determining the mental, moral and social status of every individual—namely, education and environment. In proof of this, one has only to seek in the circle of his own acquaintances. This all leads, however, to the matter of heredity and its influence upon a person's nervous and mental welfare. Upon this point may be quoted the following admirable statement of the facts in the case by Dr. James J. Putnam: "Fortunately for the educational outlook, the evidence has begun to accumulate that a morbid inheritance is not the inevitably crushing and baneful thing that it has been thought. We come into the world, each one a being of limited

capacity, but in other respects free to become what circumstances make us, and responsible, to the extent of our capacity, for our lot. We bring no ticket-of-leave which stamps us as drunkards or manias on probation, but we do bear, in the histories of our ancestors, a certificate that hints by what efforts and by what avoidances we can make ourselves reasonable successes in our respective lines. There is no original sin, and not even, as it seems to me, original propensity, but only original capacity and original limitation, and even limitation is only another name for latent capacity."

Anyone at all familiar with nervous and mental diseases must at once be struck with the unquestionable soundness and fairness of Prof. Putnam's point of view. It brings the question of personal equation and responsibility into its proper focus and hints at the happy results which we may confidently expect from a due regard for the laws of hygiene in its broadest sense. Certainly it presents a most striking and stimulating contrast to the pessimistic fatalism of the views previously alluded to.

With regard to the brain and nervous system the hygienic problem is a far-reaching one, and if we wish to attack it at its very source, we must ask ourselves at the outset by what efforts and avoidances we may expect to ensure the unborn child

against the dangers which threaten the stability of its mental and nervous organization. This is a question which leads us directly back to the period antedating conception. In many unfortunate cases at this time the personality of one or both parents is, on account of alcoholism or other vice, for the time being, in a condition of morbid alteration, the deleterious influence of which may

be profound and enduring. But proper care of the mind and body at this time is only the beginning of parental responsibility. From the commencement of pregnancy to its close, and all through the period of lactation, every effort should be made to divert from the mother all possible causes of nervous wear and tear, chief and foremost of which are worry and anxiety.

USE YOUR HANDKERCHIEF.

BY GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

An ordinance requiring the use of a handkerchief when coughing or sneezing is asked for by the Milwaukee Health Department, which seeks thereby to make permanent what was found to be one of the most effective means in combatting the spread of the recent influenza-pneumonia epidemic.

The measure is being attacked with hoots and shouts of derision by some, and strangely enough by those who clamored most loudly for help while the epidemic was upon us.

We suspect that the remedy suggested in the proposed ordinance seems too simple to our critics, who evidently are still accustomed to incantations and the beating of tom-toms as a more impressive and, therefore, more befitting ceremony for the protection of their exalted personage.

Public opinion, however, we feel, will sustain the proposed ordinance. The public very properly has come to recognize the indiscriminate spitter as a nuisance and public health menace. The public instinctively also

turns away from the careless individual who pollutes the air about him by coughing and sneezing.

There is, indeed, very good reason why the careless cougher and sneezer should be avoided. The materials which he scatters about him are the same offensive germ laden secretions which are ejected when spitting, with this difference only that the finely divided spray that is expelled from nose and throat with the cough and sneeze carries farther, and can more readily be inhaled by the unfortunate and unsuspecting victim within radius of this human atomizer.

It is a well proved fact that the secretions from nose and throat of persons with a cold carry highly virulent germs. Coughing and sneezing are common symptoms of colds. There is very good reason, therefore, why the cough and sneeze should be covered up with a handkerchief.

People of careful and considerate habits will use a handkerchief when compelled to cough or sneeze; careless and inconsiderate individuals should be made to do so.

THE CITY'S PREVENTORIUM.

By GEO. R. ERNST, M. D., Chief, Tuberculosis Division.

If we are able to interpret the signs rightly, then the time does not seem far distant when development of the body of the child at school will receive as much attention as its mental development.

We have in mind specifically health propaganda such as the Modern Health Crusader Tournaments held at present in both public and private schools of the city under the joint auspices of the Red Cross and the Wisconsin Anti-Tuberculosis Association, as well as a nutritional clinic for undernourished children, conducted under the patronage of the latter agency.

It is, of course, useless to speculate on why the old Roman adage of "a healthy body in a healthy mind" should have been made to linger so long in neglect and forgetfulness. The thing that matters is the fact that apparently the time has come when the pendulum will again swing in the opposite direction, and we trust will bring a sane and safe appreciation of the importance of health as an economic necessity.

It should not be inferred from this that nothing has been done in all these years for the bodily development of the child at school. As a matter of fact, for some years considerable efforts in this direction have been under way, and even the rediscovered essentials of the campaigns above referred to—barring its popularizing features—have been in practice in the city's Preventorium for several years now. Perhaps be-

cause the Preventorium is located outside of the city has its work come less to the attention of the public. A brief sketch of what this institution does for children may, therefore, be of interest and is herewith presented.

The Preventorium was established under the Health Department five years ago in what was known then as the Greenfield Sanatorium. The underlying thought for the establishment of the institution is to provide a place where undernourished children, and especially such that have a tubercular parent and thus have been exposed to frequent infections, might regain their health. On the average these children are kept in the country from three to six months.

It is the aim of the Preventorium to increase the vitality and resistance of each child that enters its gateway. In order to successfully combat infection we depend upon rest, air, food, cheerful surroundings and schooling. All the principles of personal hygiene are taught by practical application.

The most important factor is rest. Depending upon its condition, each child rests from two to four hours every day. There is nothing so important as perfect relaxation of the body and the nervous system. In the school the result of this rest is soon noticed, for within a short time the children will quiet down and be attentive, while formerly they were fidgety and found it difficult to con-

centrate. In spite of their resting two hours during the afternoon, the children sleep better at night than previous to their entrance. The nervous tension is finding possibility of relaxation. That this rest is most important has been shown by the improvement of such children that had received the other items of our schedule at their own home.

Fresh air, preferably cold air, is of the utmost importance. It has been repeatedly shown through observation that sanatoria for the adult sick also have made, that gains in weight are usually present during the coldest days. There is nothing so stimulating as cold air. Seeing the children sit in their eskimo suits and happily preparing their lessons with the windows of the schoolroom wide open one never finds the listless, sleepy child so frequently seen in a warm school room, which is ventilated by an expensive ventilation system.

According to our experience the third factor in regard to the value it has upon increasing the child's vitality is food. Meat is given at the most once a day. But a marked emphasis is placed upon vegetables properly prepared, fats, especially butter and cereals.

Recognizing the intimate relation of mind and body, and the influence of one upon the other, it is our endeavor to create an atmosphere of quiet happiness. Nothing can assist so well as the study of nature, and the intimate communion with its beauties. Or again, the evening story told at the twilight hour of some fine deed or person tends to awaken and develops the finer traits in our children.

During the morning the children attend the Fresh Air School, there to learn and keep up with the classmates they have left behind in the stuffy city school. Needless to say, we, too, have experienced the observation of others, that as a rule the children easily accomplish this in spite of the shorter school hours. The reason is not far to seek. Improvement in health means improvement in ability to learn.

Ninety per cent of our former pupils at the Preventorium, whose present condition is known, show decided improvement in health, spirit and intellectual power. No doubt the city has gained decidedly by thus eradicating a source for future cases of tuberculosis.

CHILD WELFARE INTENSIFIED.

By JOHN P. KOEHLER, M. D., DEPUTY COMMISSIONER OF HEALTH.

The war and the influenza epidemic have generally brought a greater realization of the value of human life. The Health Department also is alive to its increased responsibility in the work of saving human life and, therefore, has determined on an

intensified child welfare campaign. It must, of course, have the co-operation of every one in this campaign. The work at present briefly is planned as follows:

A health record is started for every child as soon as its birth cer-

tificate reaches the Vital Statistics Division. These incomplete health records, which number about forty a day, are given to our 30 field nurses who visit the homes of the new-born and complete the record of each child, giving especial attention to the social condition of the family.

These cases are all divided into three classes. The children who are in homes, well able and willing to employ a private physician, are placed in class "One" and their history charts filed accordingly. No further follow-up work is done on these class "One" cases by the nurse. Children in homes that are unable to employ a physician are registered as class "Three" cases. These children are closely watched by the nurse and seen every day if necessary and referred to the doctor at the Child Welfare Clinic once a week. Where a child in this class is apparently well it may be seen only every week or two by the nurse. Children in homes that can afford to employ a physician, but can not be relied upon to do so, are placed in class "Two." These children need watching and are seen every two or three months.

All children of pre-school age are registered by the nurses when discovered by them when visiting the homes in their districts. They are all classified the same as the new-born. When a new family arrives in her district it is the nurse's duty to learn if the young children are registered with the Child Hygiene Bureau. Since this plan of registration has been carried on, some very valuable information has been gained by this department.

A case of ophthalmia neonatorum receiving no attention was discovered. This child no doubt would have

lost its eyesight if not found by our nurse. Babies have been found whose birth certificates were not recorded. Babies who were males on the birth certificates were found to be females when the nurse made the home call. In giving the place of birth, we find that many physicians and midwives guess at the address.

The results already obtained have proven conclusively that our plan of registering every child is a step in the right direction.

The greatest difficulty before us at the present time is to supervise the health of all children in class "Three" with our relatively small number of nurses and doctors. When we have all children registered, there will be about 15,000 in class "Three." These cannot be seen as often as they should be by the nurses. The solution of the problem lies in the establishing of more Child Welfare Stations, where mothers may bring their children for inspection. Just as a school physician can supervise the health of 5,000 school children by having them come to school, so a Child Welfare doctor can more competently supervise the health of 5,000 children of pre-school age by having them come to Child Welfare Stations.

At present the Health Department has six Child Welfare Stations, but hopes to add ten more to this number very soon. Of course, we cannot have million dollar buildings for these stations, as children of school age have for education, but will be fortunate if we can even obtain the basement rooms that cannot be used for anything else, until the time comes when money will be as gladly given for health work as it is for education.

INSOMNIA OR SLEEPLESSNESS.

FROM "PERSONAL HYGIENE."

Insomnia or inability to sleep, while fairly common as an isolated experience, is fortunately not a serious condition. For all but the most profound sufferers from insomnia the treatment is simple and easily carried out. Mental work should be performed during the first part of the day and restricted to four or six hours. The importance of outdoor exercise cannot be over-emphasized. The bed-chamber should be cool; the bed hard and its coverings light. A fairly long time should be spent in preparation for retiring, but care should be taken that the feet do not become cold during this time, since the sensory stimuli thus provoked may in themselves be sufficient to keep the cortical centers alert and prevent sleep. Undue heat of any part of the body surface may also cause wakefulness; but for certain people a warm bath taken just before retiring brings about the desired result. Those who persist in going over in their minds the affairs of the day after their heads have touched the pillow should attempt to divert brain-activity by giving the stomach something to work upon, such as a glass of warm milk, a cup of hot bouillon, or even a glass of beer. Any large amount of alcohol should not, however, be taken at this time, since between the stupor thus often produced and the healthful restoration of energy which accompanies genuine sleep there can be no rational comparison. The bad effects of strong coffee taken at night need hardly be mentioned.

Prolonged insomnia, if it be absolute, is a very dangerous condition, and the measures necessary to overcome it are consequently more active. The patient—for the victim of continued insomnia must be regarded as a sick man or woman—should be kept in bed, and opium and its derivatives, as well as the whole group of so-called hypnotics, should be sedulously excluded. The mere application of mustard-leaves over the upper part of the chest and back for long-continued periods will frequently relieve uneasy feelings in the head and produce sleep for several hours. In using this remedy care should be taken not to blister the skin, since blistering is an unnecessarily severe measure. Counter-irritation, which is, of course, the object of the treatment just advocated, may also be secured by the application of bottles of warm water applied to the feet and back, and by the use of warm compressors over abdomen. Very gentle shampooing or "massage" applied to the head and neck four or five times a day for a few minutes at a time is generally soothing. This should be done by the spread-out fingers, starting from the sides and back of the head, and being carried gently down to the clavicles and about the root of the neck. One of the best methods of depleting the blood vessels of the brain is to draw the blood into the vessels of the abdomen by means of food. Food should, therefore, be given in small amounts at frequent intervals, and the largest meal should come at

night. Gentle rubbing of the whole body, beginning with the lower extremities and working up, is a good method of eliminating waste-products from the tissues, but should not be done after six in the evening and never longer than five or six minutes at any time. If carried out after the hour indicated or for a longer time than five or six minutes, the rubbing is likely to excite the patient and thus defeat the purpose for which it is undertaken. In any case the dan-

ger of producing excitement is lessened by the use of oil on the operator's hands. Such advice may be contrary to the laws which govern the technic of massage; it is, however, not massage, but gentle rubbing that is indicated in prolonged insomnia. If these measures are faithfully carried out, the resort to sedatives and hypnotic drugs rarely becomes necessary, and the danger of the formation of vicious drug-habits is happily averted.

THE HYGIENE OF INFANCY.

By WALTER L. PYLE, M. D.

The baby should not be overdressed or underdressed. The clothing should be soft, simple, loose and light, and porous for adequate ventilation of the skin. Material of loose texture is worn because of the air in the interstices, air being a poor conductor of heat. The child should wear only enough clothing to keep warm both in the crib and out of it. Clothing hampers the activity of the skin and muscles. The hands and feet must be warm, but the baby should not perspire perceptibly. The undergarments are preferably of silk and wool, or wool and cotton, and in summer cotton. In winter the undergarments should have long sleeves.

The abdominal band or binder, used night and day during the first two or three months, is of advantage only in that it prevents chilling of the abdomen and prevents the clothes from pulling on the cord. It is commonly made of very soft flannel, cut bias and unhemmed, 6 inches wide and 20 inches long. It may be

knitted or crocheted. It should be adjusted rather loosely around the body and pinned with safety-pins about the stomach. No stick-pins should ever be used about a baby. The band must not be tight for a very snug band interferes with digestion, and may cause vomiting and even rupture.

The diapers should be soft, light, absorbent, preferably of cotton or cotton stockinet. Canton flannel and linen are not so absorbent. The first diapers should be 1 yard long and $\frac{1}{2}$ yard wide. When the baby is three months old, they will have to be 20 inches wide and 40 inches long. The hemmed diaper is folded into a square, then into a triangle, making four thicknesses. A second diaper, folded into a square, may be placed under the hips or pinned in a triangular form around the waist; or a diaper-square (a small diaper folded two or three times to form a square of 10 inches) may be placed inside of the ordinary diaper.

A rubber or water-proof covering should never be worn for any continuous period, by reason of the heat and chafing engendered.

The diapers should be washed several times before the baby uses them in order that they may become quite soft. When they are wet or soiled they should be at once changed, and not used again until they have been washed with pure soap in boiling water, well rinsed several times, thoroughly dried, and aired for a day.

Socks must be worn constantly during the first months. They may be of silk thread or soft worsted, knitted or crocheted, and should reach half-way to the knee. When the child is dressed in short clothes stockings must be worn during the day; and at first moccasins of kid, felt, or chamois leather, and then thin, flexible shoes should be worn. The stockings should be white or of a light color, containing no dye capable of irritating the skin. They should cover the legs and be pinned to the diaper. The socks and stockings should not fit too snugly. Diarrhea, colic or pneumonia may result from chilling of the arms or legs, therefore these should not be bare.

Shoes are not essential until the baby begins to stand or creep. They should be made to fit the foot and be somewhat longer. They are preferably laced, and should be both right and left.

The petticoat is best made of flannel, but for summer the waist may be of cotton. It is generally made with armholes without sleeves, fastened with flat buttons or narrow ribbons. It should be about 25 inches long, reaching only from 6 to 10 inches below the feet. When short

clothes are put on this garment is shortened.

The dress is of long cloth, lawn, dimity, or nainsook, fastened in the back with buttons or ribbon, and with long sleeves.

The night-gown, of similar material, is very roomy and longer than the day-slip. In winter, the night-gown should be cotton flannel or a mixture of cotton and wool. It should be closed at the bottom with a drawing-string in the early months, and particularly in winter.

When the baby is being prepared for bed, all the day clothes should be changed for night clothes, including a clean band and diaper. Socks are unnecessary in bed, but should be put on when the baby is taken up.

A lap-protector is a most useful article. It is made of washable goods, and may contain a detachable slip of rubber sheeting.

Out-of-door garments are the long woolen coat, the thick hood, veil, and mittens for winter, and merely the muslin or silk cap for summer.

The bib is of soft absorbent cotton material. It may be worn over a rubber one.

A creeping apron is useful. It consists of yoke, provided with wide armholes and sleeves, to which is attached a bag-like skirt, the lower end of which is 27 inches wide, and is closed except for two openings, which are 15 inches apart. These openings are gathered into bands and fastened below the knee.

The layette generally contains the following: Bands, flannel, 4 to 6, diapers 6 dozen or more, shirts 6, socks 6 pairs, slips 6 or more, night-gowns 6, petticoats, flannel (and perhaps several muslin) 4, wrappers 2 or 3, sacks 2, bibs 6 or more, flannel

shawls 2, coat 1, cap 1, veil 1, mittens 1 pair.

The infant's clothes are shortened at about six months of age, depending upon the time of the year, preferably avoiding winter. When it begins to creep and stand, to prevent the diapers falling off they may be pinned to the shirt band or attached to the binder, which is provided with shoulder-straps, or they may be held

up by diaper suspenders or attached to a thin waist.

For out-of-doors in cold weather the stockings are covered with Jersey or knitted leggings.

When the baby is sick in bed it is clad in its night-clothes. These are changed every morning and night, and not used again until they are aired and warmed. The arms and chest must be kept covered.

EUGENICS.

From "How to Live."

An epoch-making discovery in 1865 by an Austrian monk named Mendel, and later discoveries by a number of other scientists, revealed the subdivisibility of each individual into many distinct units or traits, the hereditary sources of which were clearly traceable, leading to various individuals of the family line, and not to one individual alone. Furthermore, it was found that the lack of a certain trait sometimes appears as a trait in itself, just as darkness seems like a condition in itself rather than as an absence of light.

These discoveries changed the whole current of thought regarding heredity, and the constancy of its action, as well as its controllability. It also emphasized the fact that it does make a difference whom one marries as to the character of the resulting offspring. Their makeup is not subject to the caprice of forces beyond human perception, but it is in some degree subject to control.

Out of these discoveries has arisen the science of Eugenics. Sir Francis Galton, of England, was the first to

start a world movement for its application toward conscious betterment of the human stock.

From the known laws governing the inheritability of unit-traits, it is apparently necessary, in the betterment of the race, to follow a few important rules:

1. Learn to analyze individuals into their inheritable traits — physical, mental and moral.

2. Differentiate between socially noble and ignoble traits, between social and educational veneer and sterling inherent capacity.

3. Do not expect physical, mental and moral perfection in any one individual, but look for a majority of sterling traits.

4. Observe the presence or absence of specific traits in individuals at all ages of successive generations and fraternities of a family line.

5. Learn how to estimate the inheritability of such traits in a family line, upon specific mating with another family line.

6. Join your family line to one which is strong in respect to the traits in which yours is weak.

7. But remember also that injuries can be inflicted on offspring by unhygienic living.

It is apparent that the make-up of an individual is the result of a very complex combination of traits. For this reason, the make-up is not likely to fall heir to all "bad" traits, any more than it is to all good traits. Even the feeble-minded, who have fallen heir to such an intensely undesirable trait—or rather, to the lack of intensely desirable traits—in many instances have simultaneously inherited many desirable traits, such as kindness, gentleness and generosity, often lacking in those possessed of scholarly capacities. Many women of the border-line type of feeble-mindedness, where mental incapacity often passes for innocence, possess the qualities of charm felt in children, and are consequently quickly selected in marriage. If a mentally able man possess as an ideal of womanhood other traits than mental capacity, no amount of schooling for his child can make up for the difference between the mental capacity of the offspring of such a mating, and the offspring of a mating with an able-minded woman. Although the trait of able-mindedness is dominant, so that the mating of an able and a feeble mind will result in fairly able-minded offspring, who may even be above the average, mentally, such offspring carry in their own germ plasm the defect derived from their feeble-minded parent, which defect may then be passed on to future generations through the germ plasm from which their children get their inheritance. A

mother's hereditary influence on the child is just as important a factor as the father's, generally speaking. Where the feeble-mindedness exists on a family line, care should be exercised by the able-minded members of that line not to mate with another line possessing cases of feeble-mindedness, lest the offspring then fall heir to feeble-mindedness, which can skip a generation. An appreciation of what is feeble-minded, and a realization of its inheritability can not help but modify a man or a woman's admiration for the traits or lack of traits which it embraces.

Persons possessing weak physical makeups may possess strong mental capacities, and vice-versa. Persons of superior mental capacity may lack loftiness of character. It might happen that in so mating as to prevent the perpetuation of an undesirable trait, physical, mental or moral, a desirable trait would be lost along with it. In any mating transaction, therefore, choice must necessarily compromise upon the favorable hereditary action of a majority of the traits on the two family lines.

Each trait in the mosaic of one person is transmitted or not transmitted to a child according to the mating of that particular trait — mating with trait or lack of trait — rather than according to the mating of the two persons as a whole. That is, when a man and woman marry and bear offspring, it is not the mating of two units, but it is the mating of myriads of pairs of units — the units being the constituent traits and lack of traits (contained in some mysterious way in the germ plasm), each trait-mating producing its own trait-offspring. The collec-

tion of these trait-offspring makes up the child.

From these facts, it is readily understandable how important becomes the consideration of the marriage of relatives, such as cousins, who are, of course, individuals of the same family line, whose mating brings together like groups of traits, thus strengthening the existence of

these traits, whether desirable or undesirable. Cousin marriages, when the family line possesses traits of mental inability, may result disastrously with respect to offspring. Family lines possessing traits of mental weakness should most assuredly join only to family lines possessing traits of strength in those regards.

Labor Program for Health and Safety.

(AMERICAN JOURNAL OF PUBLIC HEALTH.)

1. Continued agitation for a shorter work day to a maximum of eight hours for all manual toilers.

2. Demand for a higher minimum wage for all labor.

3. Encouragement of out-door exercise.

4. Formation of fresh air clubs.

5. Recommendation of temperate habits, including a diminution of the use of intoxicants.

6. Release from work at least one full day in seven.

7. Playgrounds for children adjacent to all public schools.

8. Large, open "breathing spaces" or parks interspersed in all cities.

9. Total elimination of the sweat shop system.

10. Rigid inspection and enforcement of law in all mines, mills, factories, and work-shops.

11. Saturday half holiday, fifty-two weeks in the year.

12. Incorporation in trade agreements or in collective bargains governing working conditions of provisions for suitable ventilation, sanitation and safety devices.

14. Further agitation for better

rooms and fresh air ventilation in all living apartments.

15. A positive demand for the passage and enforcement of rigid anti-child labor laws in states where they do not now exist.

16. Abolition of night work by women and minors.

17. Equal pay for equal work regardless of sex.

18. More conferences and better understanding established among employers, workers and physicians.

19. Inauguration of community forums where health conditions can be openly discussed by parents and physicians.

21. Continuous medical and dental inspection in all public schools at public expense.

22. Complete systems of up to date physical education in all public schools at public expense, with further provision for free examination of adults by medical faculty of schools.

23. Concentration of all Federal health agencies into one department with a secretary at its head, he to be a member of the President's Cabinet.

HOW TO LIVE.

LESSON II.

W A T E R.



Next to air water is the most important of all substances necessary to life.

Nearly seven-tenths of the human body is water.

In order that the various organs of the body can do their work properly, sufficient water must be supplied daily.

Few people drink enough water; headaches, constipation, and general poor health result as a consequence.

Food cannot be properly digested nor absorbed without water.

Water is best taken between meals; it may be taken with meals, but should never be used to wash down food.

The drinking of very hot or very cold water (ice water) is equally harmful and should be avoided.

Use water liberally externally as well as internally—keep clean inside as well as outside.

DRINK FIVE TO SIX GLASSES OF WATER DAILY.

Milwaukee Health Department.



BEWARE OF COLDS



*If you would escape disease,
Cover up each cough and sneeze.*



MILWAUKEE HEALTH DEPARTMENT
City Hall Broadway 3715



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APR 24 1919

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

MARCH 1919.

Vol. 9, No. 3.

*SICKNESS is costly,
help prevent it.*

U. S. P. H. S.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIGDE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS MAXINE BIEBESHEIMER, Supervisor of Nurses.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M. 1:30 P. M. to 5 P. M. Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

ORDINANCES YOU SHOULD KNOW.

SPITTING ON WALKS AND IN BUILDINGS:

Gen. Ord. 1906. Chap 15,

Sec. 33 and 34.

No person shall spit, expectorate or deposit any sputum, spittle, phlegm, tobacco juice or wads of tobacco upon the floor or stairway or any part of any theater, public hall or building, or upon the floor or any part of any railroad car or street car, or any other public conveyance in the city, or

upon any sidewalk abutting on any public street, alley or lane; and it is hereby made the duty of the owner or agent of every theater, public hall or building in said city to provide every such theater, public hall or building with a sufficient number of spittoons or cuspidors.

Penalty—Not less than (\$1.00) nor more than (\$5.00) and costs, and in default of payment, House of Correction for not more than five days.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

MARCH 1919

Reconstruction or Destruction, — Which ?

By JOHN P. KOEHLER, M. D., DEPUTY COMMISSIONER OF HEALTH.

We are now living in a reconstruction period. Just what is meant by reconstruction, depends a great deal upon what each one is most vitally concerned in.

The soldier considers the reconstruction work done when he has been mustered out of service, sent home to his dear ones and again given his old position or something a little better.

The capitalist considers the chief function of the reconstruction period to be the gradual readjustment of buying and selling prices, so that he will not suffer any financial losses by any sudden unexpected changes in supply and demand.

The laborer hopes that the reconstruction program will be so planned that he will keep his employment, without any reduction in wages until living expenses are reduced.

We might mention many other interested classes of individuals, but we would find that nearly all consider the reconstruction period from the dollars and cents point of view.

Human life is nearly always given second consideration. Many communities find it so much easier to lose lives than to lose money. The size of our national and local budgets apportioned to health work has been a disgrace.

We have always been willing to appropriate large amounts of money to save property and cattle, but very little to conserve life.

The war has taught us to some extent the value of a human life. It has become very precious. To save lives—not to save dollars—ought to become the greatest problem of this reconstruction period.

If no more money is spent for health work from now on than has been in the past, it will mean the beginning of the period of destruction instead of reconstruction.

One fifth of our population consists of children. Not only children of France, Belgium and Italy have suffered, but the same influences have undermined the health of our own children.

Most of us owe our present health to good bread and fresh milk, butter and eggs given us in large quantities when children. When the price of these necessities of child-life goes up, the weight and health of children go down.

For every soldier who has lost his life abroad, nine children under five years of age have lost their lives here.

Any program of reconstruction without an extensive Child Welfare program, will be of very little perma-

ment value as far as the future of our country is concerned.

Such a Child Welfare program should guarantee to every child proper food, sanitary surroundings, skilled medical service and everything necessary not only to keep it alive, but to give it the best possible health.

Illegitimate children should not be put into institutions with the highest mortality rate, in order to save the mother inconvenience and embarrassment and the father expense.

Mentally subnormal children should not be compelled to compete with normal children in or out of school. A special program must be outlined for these unfortunate children, if we hope for a decrease in illegitimacy, juvenile delinquency and insanity.

Normal children should be given more time in school for recreation and physical training. The normal child needs play and if our future generation is not to be a race of "nervous wrecks", we must decrease the mental competition among children and increase physical and health competition.

Child labor laws should be made for the child and not for the employer. Children working ought to be

under the control of the Child Welfare and not Child Labor Department. Child labor is so difficult to regulate that it may be necessary to abolish it entirely. If children of fourteen and fifteen years must work eight hours a day to make a living, it would seem that a readjustment of our economic and social conditions ought to be considered.

A program undertaking to care for the health of children from the prenatal period to adolescence will appear to be a very extravagant and expensive undertaking to our near-sighted citizens.

The time has arrived when we will have to reconstruct our health programs. We have been willing to appropriate millions with which to fight illiteracy because we considered education the salvation of our government.

Illiteracy however is nothing compared to the ill-health facing us, if the "penny wise and pound foolish" policy of the past is to continue.

If this is to be a period of real reconstruction, let the government, the state, the county and the city spend at least as much for the health of the children as they spend for their education.

GOOD FOOD HABITS.

The child is the adult of tomorrow. The kind of food a child has today determines to a considerable extent the fitness of the future citizen. Those who direct the feeding of the child have a responsibility which cannot be overlooked. Good food habits should start today. Tomorrow may be too late.

1. *Have regular meal times.* There should be regularly appointed hours for eating. Do not allow children to eat except at these hours unless ordered by a physician. If the child gets very hungry two or three hours before time for the next meal, give him a slice of bread and butter. Do not give a child candy, fruit, nuts, cake or cookies between meals.

2. *Give plenty of water.* Children as well as adults should drink plenty of water between meals. Water will often satisfy the craving which many mistake for hunger. Food should not be washed down with water during meals.

3. *Children often have to be taught to like things which are good for them.* Be patient, but firm in teaching a child to like foods. Begin by giving a small amount of new food, give but one new food at a time, and repeat it regularly until the child learns to like it.

4. *Do not force children to eat when not hungry.* Forced feeding

causes more harm than light eating for a few days. If the appetite does not return, consult a physician.

5. *One should be happy while eating.* Let the meal time be a joyous occasion, without undue excitement just before, during or after eating.

6. *Allow plenty of time for eating.* Insist on thorough chewing so that the stomach may not be overtaxed.

7. *Dirt is dangerous.* Children should have clean hands and faces while eating; they should sit down to a clean table, and eat in an orderly manner. Flies should not be allowed to alight on the food either before or during meal time.

TUBERCULOSIS IN CHILDHOOD.

By GEO. R. ERNST, M. D., Chief, Tuberculosis Division.

Tuberculosis is definitely a disease of childhood. As such it is to be properly classified with the other infectious diseases, i.e., diphtheria, scarlet fever, etc. It has been proven without contradiction that, by the time infants have completed their first year, 10-15 per cent of their number have passed through their first attack of tuberculosis. As the years of life progress the percentage of children infected with tuberculosis increases and at the time when children have reached the 14th year, few indeed have escaped an infection with the tubercle bacillus.

This fact is not at all astonishing, when we stop to consider that the city of Milwaukee, for instance, has at present 4,057 active cases reported at the Health Department. These are by far the greater part, moderately and far advanced cases; cases that

singly harbor innumerable tubercle germs in their sputum. Early incipient cases are seldom reported; in fact, too often the persons themselves are totally ignorant of their condition. It is not impossible that persons, especially those beyond the twenties, unconsciously carry germs in their sputum for many years until perhaps a chance examination reveals their true state of health. It will hence cause no surprise to be told that children very early in their life experience an attack of tuberculosis.

In a way, this may even not be a detrimental occurrence. For, similarly to the other infectious diseases, one attack practically immunizes against a second attack. The first infection produces so-called anti-bodies in the blood, which successfully neutralize and do away with an infecting organ-

ism. How effective these anti-bodies are, depends upon the condition of the body that produces them. There are especially two reasons why we should guard against a tuberculosis infection; first, we never know how massive, and secondly we cannot tell how virulent the infection may be. The anti-bodies in the blood of a child may be able to render innocuous a comparatively small amount of infection, but, if the infection is too massive, too often repeated or too virulent, the protecting agencies of the child's system are overwhelmed and it will be unable to place a barrier around the bacilli.

Then, too, the protective agencies in the body of an infant are as yet incompletely developed and are unable to furnish the vigorous anti-bodies of a more mature system. With the practically universal presence of the tuberculosis bacillus it is to be expected that the mortality rate due to tuberculosis amongst infants must be very high. This is actually the case. The New York Health Department has conclusively shown that the number of deaths due to tuberculosis is higher amongst infants less than one year old than it is during any other year of life. To be sure, the diagnosis of tuberculosis during infancy is difficult, and far too often the diagnosis of congenital debility, marasmus, etc., is made, but the tubercle bacillus is the cause. These infants infrequently die of tuberculosis of the lungs, but more often of meningitis, broncho pneumonia, or digestive disturbances.

After the second year of life a remarkable decrease in the number of

deaths due to tuberculosis becomes manifest, in spite of the steadily increasing percentage of infections. In fact, from the third or fifth to the twelfth or fifteenth year is the golden age of a person's life so far as tuberculosis is concerned. Following upon this most fortunate period, puberty sets in with all its disturbing factors. This is the only way of explaining the very marked increase of the death rate to be found among girls beginning with the 12th year, while the death rate of boys does not rise until they have reached the 16th year. This ratio continues until the age of 20, when for the first time after infancy more boys die of tuberculosis than girls.

All these factors point to the conclusion that the universal presence of the tubercle bacillus is, as far as the death rate due to tuberculosis is concerned, not so important as the condition of the child infected. And again, to bring about a general decrease of the death rate, while not neglecting the phase of infection, our attention must be principally occupied by the state of health of the child. And thirdly, the periods of life that require our care more than any other, other things being equal, are the first two years of infancy and the years preceding puberty, i. e., from about the tenth to fourteenth year.

The assurance of a healthy childhood rests first upon economic conditions, which must be such that parents are given the financial possibility of bringing their children up properly.

Furthermore, where necessary, par-

Tuberculosis is curable if recognized in time.

ents ought to be assisted in their care for their children. At times, no doubt, an improvement in the housing, in the management of a household, in the demonstration of a proper diet, etc., will be imperative. Education of the parent sounds very good but is most difficult. Seeing the immense value of these items to the future of a city, the entire tuberculosis question focuses itself wellnigh exclusively upon the child, the Health Department has undertaken this arduous task of education. Unfortunately, for the infants that are found in tubercular families little can be done save the imperative removal of the tuberculous parent to a sanatorium. Since our sanatoria are usually well filled, this is at times a difficult matter. It would be much better if our Preventorium would be enlarged so as to be able to accept these infants, which, as a rule, can find no hospital to receive them. To insure a reasonably certain future, these infants ought to be kept at the institution for about a year.

For the older children, especially such that have a tubercular parent and thus have been exposed to frequent infections, the Health Department has established our Preventorium. Also children who are poorly developed and undernourished and give a positive tuberculin reaction are sent to this institution. These children are kept in the country from three to six months. If the health of the child is a more important factor than the infection, no doubt this institution is more valuable as far as prevention of tuberculosis is concerned than a sanatorium for adult sick. It may be objected that, after a few months in the city, the children from the Preventorium will have lost the benefit of their stay in the country. Such, however, does not seem to be the case. Following up the discharged cases, we have found that the children in the largest number of instances retain their bodily improvement, and frequently we have heard that the children have been successful in influencing conditions at home.

PLAY FOR RECREATION.

FROM "HOW TO LIVE."

All work and no play make not only dull boys but dull men and women.

In some form, everyone can secure recreation. If one can not play golf, or polo, or tennis, or swim, or climb the Alps, at least he can walk, and, if he tries, he can do so in good company on interesting highways and by-ways.

Recreations in which more persons than one take part are far superior in this respect to those of a solitary nature. They require a give and take,

a matching of wits, a feeling of rivalry, and at the same time, companionship.

Plays and moving pictures of the right character and free from morbid suggestions, if enjoyed in moderation, are hygienic. Comedy is generally more wholesome than tragedy. Laughter lengthens life; tears do not.

The proper kind of reading is often a most beneficial type of recreation.

It is best for the average individual to avoid literature that deals with the

morbid and pathological, that depicts and analyzes abnormal psychological conditions. Such studies are better left for alienists. Literature of mawkish sentimentality should also be avoided. Within the range of sound literature there is a wide choice of abundant material affording healthful mental suggestions.

Dancing combines wholesome exercise, social enjoyment and the acquirement of skill and grace, but it is seldom of much hygienic value because it is frequently overdone, and often involves bad air and loss of sleep. In one large plant where the employes were examined by the Life Extension Institute, the management regarded the harmful effect of dancing as their chief obstacle to efficiency. Many of the large force of girls and women were accustomed to dance until late in the night, bringing on condition of chronic fatigue.

Card-playing and similar games afford a wholesome mental recreation for some persons. However, they, too, are liable to be associated with late hours, and other disadvantages even when they do not degenerate into gambling. Card-playing, dancing and many other popular forms of amusement often border on dissipation.

Amusements which weaken and de-grade are not hygienic. Many who need amusement make the fatal mis-

take of getting it in suicidal ways, in the saloons, dives, and the low dance halls.

Play is simply a half way stage between work and rest. In a hygienic life there must be a certain amount of actual rest. Every bodily power requires rest after exertion. The heart rests between beats. The muscles require relaxation after every contraction. The man who is always tense in muscle and nerve is wearing himself out.

The power to relax, when fatigue requires it, is one of the most important safeguards one can possess. Lying down when tired is a good rule. A very hard-working college president when asked about the secret of his working-power and length of life replied, "My secret is that I never ran when I could walk, never walked when I could stand, never stood when I could sit, and never sat when I could lie down."

Such rules as these are valuable, of course, only when the requirements of one's occupation tend toward ceaseless activity. For idle and lazy people the rule should be reversed—never to lie down when one could sit, never to sit when one could stand, never to stand when one could walk, and never to walk when one could run! A complete life must have all in due proportion.

Try Optimism for a Spring Tonic!

The Value of Competition in Health.

BY JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

The nutritional clinics conducted by the New York Child Health Organization last year have demonstrated that the group spirit and spirit of competition which can be aroused in children are the most potent forces in keeping up interest and getting results in health work among school children.

The grading of pupils and the issuing of monthly report cards, unquestionably drives children to greater mental effort.

If children were graded in school according to their health, no doubt, we would have a great improvement in their health.

If a child brought home a monthly health report card, something would be done if it read as follows: nutrition 60, condition of teeth 50, vision 75, cleanliness 68, nervous system 50. At first something might be done to the physician who did the marking, but before very long both child and parents would make an effort to get better health marks.

In the past the mistake has been in the effort to impose a set of arbitrary rules for health instead of arousing the child's own interest and cooperation.

Public health education is one of the great needs of our time, but it must begin with the children and be made an essential part of the teaching in our elementary schools. Instruction in health is really the most vital part of education, and it must be given while the child is at the receptive age.

The vulnerable part of our educational system today is the ignorance of teachers on personal and public health.

It is difficult to interest children in health problems if the teachers are not interested and it is difficult to interest teachers if they are so ignorant in matters concerning health, that they can't even appreciate its value.

In order to stimulate more interest in health education in our grade schools, the Milwaukee Health Department and the local branch of the American Red Cross have made arrangements to place one hundred scales in the largest public and parochial schools. These scales with measuring rods will be used to weigh and measure every child once a month.

Special class-room weight record charts and instructions to teachers for the conducting of these weighing contests will be furnished to every room by the U. S. government through the Milwaukee Health Department.

These weighing clinics will accomplish at least two very definite things. They will discover the children who are under weight, and those who are losing or failing to gain weight. These can then be referred to the school physician and nurse for further investigation. They will stimulate the children who are under weight to follow instructions necessary to reach the normal weight.

If teacher tells Jimmie he is five pounds under weight and must drink

more milk, eat more bread and butter and potatoes, Jimmie will feel inclined to follow the teacher's advice, so that when he is weighed again on the following month, he will be complimented on his gain in weight.

At the Preventorium of the Milwaukee Health Department, it has been proven beyond doubt that children under weight, given fresh air, good food and plenty of rest, can be made to reach the normal weight within a comparatively short period of time.

The Wisconsin Anti-Tuberculosis Association has proven through its nutritional clinic that under-nourished children need not be taken to an institution to regain their normal weight.

By doing intensive home and school work, children may receive the proper food, fresh air, rest and other factors necessary for proper nutritional development. Although it is possible to get results by doing intensive work on poorly nourished children, either at home or in an institution, yet we must admit that the same attention given to fifty children in an institution as the Preventorium or at a nutritional clinic as is conducted by the Wisconsin Anti-Tuberculosis Association, cannot be given to the fifteen thousand under-nourished school children which are in Milwaukee.

When you are dealing with fifty children, you may assign a worker to almost every child, who will keep that child under continual supervision and instruction. When you are dealing with 15,000 children a fifty children plan cannot be used.

The weighing and measuring of

school children once a month in connection with a health program in each room, appears like the most practical solution of the mal-nutrition problem, at least for the present. When the time arrives when we can have one nurse for every forty pupils as we have one teacher now, and one full-time physician for every school as we have one principal now, then plans for more intensive work can be carried out.

At the present time this monthly weighing and measuring program is carried out at two of our large parochial schools; St. Casimirs and St. Michaels, each with an attendance of over one thousand children. The scale hasn't been at St. Michaels school long enough to prove its value, but our experience at St. Casimirs has convinced us that one scale in a school and about one hour a month set aside by each room for the weighing of children, will accomplish a great deal for under-nourished children.

While the normal gain per month for children in the grade school is about 8 oz., the weight records at St. Casimirs school show an average gain of one pound and five ozs. The children know that their school teacher and the Milwaukee Health Department want them to gain in weight and are going to do all they can to do so, even if compelled to eat things they don't like.

After every school has a scale, it is planned to give a banner every month to the room that has the highest average gain per child. Our plan is to stimulate competition in health work, not only among the individual children, but also among the schools.

SLEEP.

From "How to Live."

Sleep is nature's great rejuvenator, and the health-seeker should avail himself of it to the full. Our sleep should not only be sufficient in duration but also in intensity, and should be regular.

Exercise taken in the afternoon will often promote sleep at night in those who find sleep difficult. Slow, deep, rhythmic breathing is useful when wakeful, partly as a substitute for sleep, partly as an inducer of sleep.

Sleep may also be induced by monotonous sound, or lack of sound, or the monotonous holding of the attention. Keeping awake is due to continued change and interruption or arrest of the attention.

The number of hours of sleep generally needed varies with circumstances. The average is seven to nine. In general one should sleep when sleepy and not try to sleep more. Growing children require more sleep than grown-ups. Parents often foolishly sacrifice their children's sleep by compelling them to rise early for farm "chores", or in order to sell papers, or for other "useful" purposes.

One's best sleep is with the stomach empty. It is true that food puts one to sleep at first, by diverting blood from the head; but it disturbs sleep later. Water, unless it induces bladder action during the night, or even fruit, may be taken without injury before retiring. If one goes to bed with

an empty stomach, he can often get along well with six or seven hour's sleep, but if he goes to bed soon after a hearty meal, he usually needs from eight to ten hour's sleep.

It has already been pointed out that sleeping outdoors is more restful than sleeping indoors.

A pillow is not a necessity if one sleeps lying prone with one arm extended above the head and the leg opposite drawn up. This sleeping attitude can easily be reversed to the opposite side. It has one advantage over pillow-sleeping, that of not tending to round shoulders. This prone position is often used now for infants, but is seldom enjoyed by adults.

A modern "hard" bed is far preferable to the old-fashioned soft (and hot) feather bed.

The character of sleep depends largely on the mental attitude on going to bed. One should get into the habit of absolutely dropping work and cares at bed time. If then one suggests to himself the pleasantest thought which memory or imagination can conjure up, his sleep is likely to be far more peaceful and restful than if he takes his worries to bed, to keep him awake unless sleep comes in spite of them, and to continue to plague him in his dreams. If one is worried, it is a good plan to read something diverting, but not exciting, just before retiring.

Keep the Bedroom Windows Open.

THE HYGIENE OF INFANCY.

By WALTER L. PYLE, M. D.

FOOD.

The best food for the baby is the mother's milk. Breast-fed babies are larger and much healthier than those bottle-fed, and have a much lower mortality. Early nursing of the baby is a good practice, because it stimulates the secretion of milk and improves the nipples if poorly developed, besides having a purgative effect on the child's bowels. During the first day or two sweetened water should not be given, a little fairly hot water will suffice.

Regularity in nursing is of supreme importance. For the first six weeks the baby should have the breast every two or two and a half hours each day, and later every three or four hours.

It should never be allowed to sleep at the breast. If it falls asleep while nursing, it should be removed from the breast immediately.

Often a baby cries because it is thirsty. Water should be given to it several times daily. It should be trained to sleep without nursing at night.

In nursing the child should be supported by the mother's arm. After convalescence the mother can apply the nipple to the baby's mouth better by slightly bending forward, raising the breast with the fingers to keep its weight off the little one's nose. Withdrawing the nipple is sometimes necessary for breathing space and prevention of choking. If the secretion is too slow, the hand should be pressed on the breast; if too rapid, the base of the nipple should be pressed between the fingers and thumb.

The mother secretes normally about one pint daily during the first weeks, a greater amount later. Simple regurgitation is merely a sign of excessive supply, unless attended with a sour odor and poor health, but calls for shorter nursing periods. Ordinarily, after the baby has emptied one breast, in ten to fifteen minutes, it falls asleep and should be removed.

If the amount of milk be insufficient, it may be increased by drinking copiously of cow's milk, taking various milk-foods, extract of malt, etc. It is important that the mother take regular exercise and get plenty of out-door air. She should also avoid all excitement and late hours. In case of sudden emotion, it is best to empty the breast with the pump and resort to artificial feeding for a few hours.

The nipples should be cleansed before and after nursing with boric-acid solution and gently dried. If they are poorly developed or slightly sore, an artificial nipple should be applied. To prevent caking, massage with olive oil, and use the breast pump if necessary.

Weaning should occur when the baby is about ten months old, but this depends upon circumstances; unfavorable periods are in summer and during teething. It is best done gradually. Indeed, some physicians advise beginning at the fifth or sixth month by substituting one or two bottles a day. Weaning is generally prolonged for about a month, but if the baby refuses to take the bottle, or even a cup or spoon, the breast must be withdrawn permanently at once.



PUBLIC HEALTH CLIPPINGS

RESULTS OF CAMPAIGN AGAINST
VENEREAL DISEASES IN
THE ARMY.

The Surgeon-General of the Army has recently issued the results obtained from the campaign for combating venereal diseases. Reports indicate that approximately 85 per cent of the men entering the Army were already infected and that 15 per cent of all cases reported were contracted after enlistment.

Coincident with the introduction of preventive medicine measures, the annual venereal disease rate dropped from 155 cases per 1,000 in 1910 to 83.60 per 1,000 in 1915. These 83.60 were practically all new infections, as, at that time, men infected with venereal diseases were refused admission to the regular Army.

Under the Surgeon-General's program as outlined the annual venereal disease rate per 1,000 in the United States (new infection) has dropped from 83.60 per 1,000 in 1915 to approximately 20 per 1,000 in 1918.—*Social Hygiene Bulletin*, October, 1918.

(D. G.)

to be cared for,—those that have been excluded by the draft boards.

This problem can be met by the establishment of local tuberculosis hospitals and sanatoria and in part by local dispensaries. Each community should provide at least one center for the free medical examination, treatment, advice and instruction of the tuberculous and those living in intimate association with them. In addition, there should be developed a system of home supervision for advice and aid to patients in their homes.—G. J. Nelbach, *Proc. N. Y. State Conference of Mayors*, 1918.

(D. G.)

HEALTH AND DISEASE.

The greatest asset of our nation is health. The greatest liability is disease. We should bring our books to a balance. Every day be able to charge off. Remember we are not as healthy as we should be, or may be. Disease is rampant and our hope is through the intelligent care of public health. We are gaining knowledge; this knowledge brings new laws and better results. We inherit both health and disease. If our public health had been properly safeguarded through the past generations from the thousand and one bad sources of contamination, disease would be practically unknown. Let us then instill in the youth of our land the advantages of good health for the protection of future generations.—*Michigan Public Health*.

TUBERCULOSIS AND THE WAR.

If the experience of our Allies is to be used as a criterion the soldiers who are sent to tuberculosis sanatoria will leave very soon after their admission. These men desire to get back to their homes and friends, and there, their care, treatment and supervision will devolve upon the local authorities. Then there is a second group of cases

FIVE FILTHY FINGERS.

Did you ever make a diary of your fingers? Did you ever set down in cold black and white the things your fingers touch every day and did you ever consider the number of times daily that your unwashed fingers seek your mouth?

When surgeons discovered that it was their own infected fingers which carried germs into wounds, they set about trying to discover a means whereby their hands could be rendered surgically clean, i. e., free from germs. The whole realm of chemistry was ransacked for agents which would disinfect hands, and the scrubbing and immersions to which they subjected their hands are even yet a tender memory to the surgeons of that period. But all these efforts proved useless and at last in despair surgeons took to wearing rubber gloves which could be boiled, thus bringing to each patient, as it were,

a fresh pair of sterile hands. In other words, try as you will you can't by any known method make your hands absolutely clean.

What an enormous number of infected things we touch during the day and how infrequent and cursory are the hand washings we perform.

The answer is to keep your fingers out of your mouth and nose. Thus we limit the spread of disease from these orifices at least, thus we eliminate the danger of contracting disease from someone else who was not quite so careful.—*Exchange.*

Recognized early, tuberculosis is the most curable of diseases. If called "malaria," "weak lungs," "chronic bronchitis" or some other spurious name until well advanced (and other members of the family have contracted tuberculosis) it is then too late to save the patient by changing the name of the disease.

Order Your Bulletin.

We want the Bulletin to go only where it is wanted. If you wish the Bulletin sent to you for the balance of this year kindly fill out the attached order form and mail it at once.

Unless we receive your order for a continuance of the Bulletin your name will be dropped from our mailing list.

Milwaukee Health Department,
Bureau of Publications.

Gentlemen: Kindly send me the Bulletin for the balance of this year.

Name

Address

Date

HOW TO LIVE.

LESSON III.



Food and Eating.

Food is necessary for body growth as well as for the replacement of tissue worn down by work.

A mixed diet including every variety of food is best.

A Milk is the best all-round food for children.

A well balanced diet should include some hard food, such as the hard crusts of bread, some bulky food, such as vegetables, and some raw food, such as fruits.

Eating above the body needs not only wastes food, but is harmful to health as well.

The brain worker requires less food than the man who uses his muscle.

Less food is required in summer than in winter.

After 40, meat should be used sparingly.

Don't eat unless hungry.

Don't eat when overtired.

Don't eat when irritated.

Don't work immediately after eating.

Season your food with cheer.

**LEARN TO EAT SLOWLY AND CHEW YOUR
FOOD THOROUGHLY.**

Milwaukee Health Department.

Health Essentials

FOR THE CHILD AT SCHOOL.

Wash hands before meals.

A full bath more than once a week.

Brushing the teeth at least once every day.

Sleeping long hours with windows open.

Drinking as much milk as possible, but no coffee or tea.

Eating some vegetables or fruit every day.

Drinking at least four glasses of water a day.

Playing part of every day out of doors.

A bowel movement every morning.

Bureau of Education, Washington, D. C.

Milwaukee Health Department.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

APRIL 1919.

Vol. 9, No. 4.

*"A habit of labor in the people is
as essential to the health and vigor of
their minds and bodies as it is con-
ducive to the welfare of the state."*

—Alexander Hamilton.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIGDE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MISS MAXINE BIEBESHEIMER, Supervisor of Nurses.

HEALTH DEPARTMENT GENERAL DIRECTORY

TELEPHONE CALLS.

The City Hall telephone number is Main 3715.

Do not ask merely, for the "Health Department"—get the proper person or division. If uncertain, tell the operator, briefly, what your call is about, or ask for the Chief Clerk.

The following offices are located on the sixth floor in the city hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.

Food Inspection Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:
Tuberculosis Division.

OFFICE HOURS.

General Office Hours, 8 A. M. to 12 M., 1:30 P. M. to 5 P. M., Saturday afternoons and Sundays, Closed.

Engagements with the Commissioner should be by appointment.

ORDINANCES YOU SHOULD KNOW.

SPITTING ON WALKS AND IN BUILDINGS:

Gen. Ord. 1906. Chap 15,

Sec. 33 and 34.

No person shall spit, expectorate or deposit any sputum, spittle, phlegm, tobacco juice or wads of tobacco upon the floor or stairway or any part of any theater, public hall or building, or upon the floor or any part of any railroad car or street car, or any other public conveyance in the city, or

upon any sidewalk abutting on any public street, alley or lane; and it is hereby made the duty of the owner or agent of every theater, public hall or building in said city to provide every such theater, public hall or building with a sufficient number of spittoons or cuspidors.

Penalty—Not less than (\$1.00) nor more than (\$5.00) and costs, and in default of payment, House of Correction for not more than five days.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

APRIL 1919

ON GIVING HELP.

BY GEORGE C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

"God helps them that help themselves," runs a well-known saying, which like many expressions that have been adopted into popular usage holds a great deal of practical wisdom and philosophy.

Obviously this saying does not mean to pass judgment on the Almighty's way of doing things.

It does, however, mean to put the idea across that God is strong for those that get out and hustle.

Unfortunately there are not a few who expect the Almighty to do all of the hustling, and to dispatch the raven forthwith to fetch bread and meat while they pursue a course of watchful waiting in the meantime.

Again, there are also those who essay in the role of the useful raven bringing help to the expectant one.

There is a right way and a wrong way of doing in all matters; even in the matter of giving help there is a right way and a wrong way.

To give alms; to give food, clothing, money to the poor and needy has always been accounted praiseworthy.

No one will question, of course, the necessity and praiseworthiness of coming to the assistance of those in need.

There is, however, a world of difference in the manner in which such help is offered; the giving may prove an undoing instead of a help.

If the giving is undertaken as the sufficient means for the cure of poverty, it is a wrong way of giving.

One might as well try to put out a conflagration with a sprinkling can as to cure poverty by the giving of alms.

Help, to be of real value must be constructive; it must lead to self-help and independence.

Giving without this end in view is merely a palliative; it is treating a symptom without considering the underlying cause.

Real help will go to the root of the trouble, even while it relieves the pain of immediate distress.

Poverty needs a job more than it needs charity.

The man who is down needs a moral prop; he must regain confidence in self; he must feel that he can come back.

Misapplied charity may put out the smoldering embers of ambition; may destroy the last vestige of self-respect, and in that way destroy utterly all chances of reconstruction.

The right way of helping is by assisting the fallen so that they may stand again and walk unaided.

BODY POSTURE AND DIGESTION.

BY CHARLES G. STOCKTON, M. D.

For the correct performance of function on the part of the stomach, liver, and intestines it is necessary that free and properly related movements of these organs should take place. Such movements are impossible in the large majority of women. The defects are so common, and the deformities of the body necessarily associated with them begin so early in life that they are largely overlooked, and are argued to be natural and beautiful by the mass of womankind. A certain amount of intra-abdominal pressure is necessary if the viscera of that region are to be held in their proper places and proper relations. This is possible only when the body is erect in sitting and standing when the chest is kept habitually raised to its normal position, and when the abdominal muscles are strong, and are not allowed to relax, pouch out, and thus favor the descent of the organs. This position should be urged during childhood, and mothers should be instructed in the proper method of dressing their children so that the chest may have the freest motion without meeting with opposition from the clothing. All garments should be suspended from the shoulders, to prevent the downward displacement of the stomach, intestines, kidneys, liver, etc. Practically all women stand in an improper attitude, a fact of which they are apparently ignorant. Others would not remain ignorant of the fact but for the concealment attending women's dress. That this is no exag-

geration, every physician who has given the subject careful study will readily agree; but the fact that more than 50 per cent of all civilized women, in all classes of life, have developed the condition known as enteroptosis, which means that the stomach, intestines, very often the kidneys, and sometimes the liver, are dragged downward and remain permanently out of their proper position, is not generally known. Such, however, is the case; and this condition more than any other cause is responsible for the constipation, backache, debility, biliousness, early loss of complexion, headache, and that long list of ailments of which so many women in all civilized countries are victims. Those who have vigorous constitutions, strong nervous systems, and who keep the body in a healthy tone by leading out-of-door lives and avoid the common habits of worry and petulance, may live with moderate comfort even though suffering from the enteroptosis made necessary and permanent by the methods of dress. But the greater proportion of women lack these sturdy qualities, and therefore suffer more or less from the symptoms described. Furthermore, this downward dragging of the abdominal organs leads to displacements and derangements of the pelvic organs, and the genito-urinary diseases so common in women are a natural result. In young children the intestines have not yet assumed that position which is normal in adult life,

and in some this lack of development makes a constant difficulty in evacuation of the bowels. By a slow process, and in the absence of interference, these matters in time right themselves; but not infrequently the child

is so handicapped through the want of out-of-door sports, adequate physical training, and proper methods of dress that the large intestine never assumes its proper place.

WHEN TO CHANGE UNDERWEAR.

This is the time of the year when many are changing from heavy to light underwear. Many times the question is asked: "Doctor, do you think it is too early to put on light underwear?" Most people, however, make the change without ever consulting the family physician. Some never change from heavier to lighter or lighter to heavier, which in many instances is a safer practice than to change suddenly in the spring.

Body temperature is regulated mostly by the nerve and blood supply of the skin. This heat regulator adapts itself to its surroundings. If the skin has been covered all winter by a warm under-garment, the heat radiation from the body has been increased, by having the blood out near the surface of the skin to cool.

The human system in this instance is depending upon the heavy garment to prevent the skin from being cooled too suddenly.

If, however, when this temperature outside of the body is still much lower than the body temperature, you take away this equalizer of temperatures, which your body has been accustomed for months, there is danger that the skin cannot adapt itself quickly enough to the lighter cloth-

ing, with the result that the blood in the skin will become cooled too suddenly, thereby lowering the body temperature. This subnormal body temperature lowers the resistance against infection.

At the same time nature tries to consume as much heat as possible by having the blood rush inward away from the skin. This blood from the skin goes to the mucous membrane of the respiratory and alimentary tract. The victim then knows that he caught cold, because this congested mucous membrane secretes more mucous and also feels congested. These colds may vary from a slight congestion of the nose to a congestion of the lungs.

However, be they mild or severe, they ought to be avoided if possible. This can be done by wearing the same weight under-garments all year, where the winters are not too severe, or where it is necessary to wear heavy underwear in winter, it should not be replaced by light underwear until the temperature is not as low and variable as it is in the spring. In this climate winter underwear should not be discarded before May, and it is still better to wait until June.

FINISH THE JOB—BUY LIBERTY BONDS.

The Effect of Eye-Strain on Nutrition.

It has long been recognized that the continued use of the eyes in all manner of fine work, often in imperfect or wrongly directed light, is a fruitful source of headaches and various expressions of nervousness, but that the appetite and digestion are also made to suffer are facts that are too little recognized.

Whoever carefully looks into this matter will find really that nutrition first shows the result of nerve-strain, no matter from what source arising; and, as a rule, some peculiarity of the primary digestion gives the earliest intimation of the trouble. For instance, there may develop a distaste for certain substances in the dietary; the appetite may become capricious or perverted. Again, a disturbance in motion will arise, and the stomach may contract in a spasmodic, tremulous, or irregular way, while the individual is conscious of disagreeable and sometimes alarming sensations, accompanied by eructations of gas or fluid from the stomach. Or the gastric juice may be secreted irregularly, and in many instances a long chain of dyspeptic symptoms appear without any real disease of the stomach, but merely a disturbance of the nervous system occasioned by improper habits of life. In a certain sense the stomach is acting in the role of monitor; but if we are sufficiently wise it may often be regarded as that of the kind mentor. This most common experience may be avoided sometimes by removing the strain to the nervous

system, and again by strengthening it by exercise, bathing, recreation, and more hours for sleep and repose. Eye-strain may be lessened or obviated by the wearing of spectacles that are made accurately and adjusted precisely; or by attending to the direction in which light enters the room, or perhaps by prohibiting the use of books printed with small or illegible type. Observance of these precautions may render it unnecessary for the individual to give special attention to his diet; but it is the usual custom at first for the stomach to be considered the source of trouble. As the disagreeable digestive experiences are attributed to the stomach the fault is commonly supposed to lie in the character of the food, and wise-acres take the responsibility of advising the withdrawal of sugar, fats, or meats, and the abundant taking of oatmeal, grits, and beef-tea, a dietary most likely to undermine resisting power and in the end do infinite harm. For similar relief resort is sometimes had to a milk diet or to abstinence from food, because it is found that the stomach is more comfortable when it has little to do. But this erroneous course will ultimately fail; it is wiser, when possible, to remove the cause of difficulty. When it is impracticable to remove the source of worry it becomes necessary to modify the diet, and it is a compromise of this sort that unfortunately we sometimes make.—Exchange.

IT IS TIME TO SWAT FLIES.

PRESERVATION OF TEETH.

FROM "PERSONAL HYGIENE."

The preservation of the teeth resolves itself into a few simple principles; namely, the prevention of overcrowding, the avoidance of chemical or mechanical injury to the teeth and gums, the careful and frequent cleansing of all the exposed surfaces of the teeth, and the use of such harmless antiseptics as will prevent the long continuance of pathogenic bacteria in the mouth. The most easily available means of protection lies in the proper cleansing of the teeth. For this purpose the frequent use of the tooth-brush is indispensable. The ordinary bristle brush has been opposed on the ground that it is too hard and is liable to injure the gums, particularly when stray bristles are thrust into the soft parts around the teeth. Brushes of badger's hair, or felt, and of various other substitutes, have been recommended. Most of these contrivances, however, are lacking in the essential resistance and elasticity so important in the thorough dislodgement of foreign matter. The bristle brush in which the bristles are not too closely placed together, thus admitting of their passage between the teeth, is the most practical instrument. Great care should be taken not to allow the bristles to spread, and the brush should be discarded before it is so ragged from long use. The brush should not be too broad, and the handle should be bent in the direction of the tuft on the brush so as to admit more easily the reaching of

the various curved surfaces of the teeth. The brushing should be practiced after each meal and before going to bed, and once daily should be accompanied by the use of tooth powder sufficiently coarse to produce some grinding and polishing effect. A powder that is too soft or too fine is of little avail. Powdered chalk and orris root are common bases for tooth powder. Some harmless antiseptic, such as borax, oil of wintergreen, or tincture of myrrh, should be incorporated with the powder to help destroy any colonies of bacteria that may be reached. Twice each week all the exposed surfaces of the teeth should be carefully gone over, and, with the assistance of the tooth powder, carefully rubbed with a narrow chisel-like piece of wood that is hard and finely grained in texture, such as orange-wood, so as to smooth away all the roughness and inequalities. This puts a smooth polish on the teeth and renders their subsequent cleansing by means of the tooth brush a comparatively simple matter. If this rule were applied in the care of children's teeth, the work of the dentists would be greatly restricted. Of equal importance is the daily use of soft, silk twine, known as dental floss. It should be drawn between the teeth firmly but carefully, so as to remove foreign matter that cannot be reached in other ways. It is important not to cut or irritate the gums or loosen their attachments to the teeth. A little experience enables one

to accomplish the work deftly and quickly. In the neglect of this practice the teeth can hardly be said to have been cleaned. In addition to these methods, the mouth and teeth should be carefully rinsed every night with some innocuous antiseptic solution. Some of the most harmless antiseptics are powerful germicides, and should be employed to the exclusion of others that may do injury to the general health of the individual as well as to the teeth. Tincture of orris, rose-water, and alcohol in equal parts, flavored with a drop of oil of bitter almond, make a very

agreeable mouth-wash, and it may be rendered more actively antiseptic by the addition of 0.5 per cent formalin.

The importance of the teeth in digestion is not sufficiently recognized. Many cases of chronic indigestion arise from imperfect mastication due to faulty dentition. In all such cases it is of primary importance to have decayed teeth filled, or if there are many missing teeth they should be replaced by artificial ones. Otherwise medication and dietary regulation may be of little avail.

DRINKING WATER.

Most people leading sedentary lives take too little water, and also err in taking it for the most part when eating. A certain amount of water always should form a part of every meal, and particularly is it necessary in those who have very active digestion. It assists the escape from the stomach of those substances made soluble by the action of the gastric juice and the churning effect of the stomach, and will sometimes make digestion comfortable when it otherwise would be attended with distress. But while it is allowable for water to be taken with meals, it again should be repeated that the food should not be washed down. Such a practice not only interferes with starch digestion, but it also enables the individual to swallow morsels of food altogether too large and resisting for the stomach to manage comfortably. The proper time for taking the bulk of the fluid is between meals, particularly early in the morning and

late at night. It is a fact well known to physicians that women especially drink too little water; the habit probably results from the inconvenience attending the taking of the proper amount. While a person may be saved some embarrassment by this kind of denial, positive harm usually results from the continuance of the practice. The American habit of drinking ice water has been much censured. It is unnatural, and in some instances harm may be traced directly to it. In many no injurious effect appears to follow its use. This must be said in its favor, that those who enjoy cold drinks are likely to take sufficient water, which is not true of the ordinary individual.

Harm comes from the practice of drinking hot water in the false belief that it prevents or cures dyspepsia. Doubtless hot water has its place, and it is to be recommended rather as a remedy than as a daily usage.

—Exchange.

THE HYGIENE OF INFANCY.

ARTIFICIAL FEEDING.

BY WALTER L. PYLE, M. D.

The best substitute for mother's milk is cow's milk. This should be pure, from healthy, well-kept cows, preferably mixed-herd milk obtained under absolutely sanitary conditions.

A good artificial human milk is that proposed by Dr. Meigs:

Milk 1 part
 Cream (by skimming: 16 per cent. fat)..... 2 parts
 Lime water 2 parts
 Sugar water (17 $\frac{3}{4}$ drams of milk-sugar dissolved in 1 pint of water)..... 3 parts

The preparation of the food is of prime importance. The amount for the day should be made up at one time, as soon as the milk and cream arrive. The amounts of the various ingredients best suited to the baby will be given by the physician.

The mother should have a pint or quart measuring-glass, and also scales registering in half ounces.

If there is any question as to the cleanliness of the milk, pasteurization should be employed, heating the milk to 155°-167° F. The pail is partly filled with water, heated to boiling, and then removed from the stove. The thoroughly clean bottles, filled with the milk-mixture and plugged with raw cotton, are placed in the rack, the cover applied, and the pail allowed to stand for forty-five minutes. Then water from a faucet is turned into the pail to cool the bottles, which are then put on ice.

The bottle used in the pasteurizer is used as the nursing-bottle. When

the prepared milk in this bottle is to be given to the baby, the cotton plug is removed and a rubber nipple adjusted. Then the bottle is placed in a cup of water which is heated until the milk is from 95°-100° F.

To heat the milk quickly, as at night, a good device is a cylindrical tin vessel 3 inches in diameter, and high enough to cover the bottle up to its neck with water. It has a perforated false bottom on which the bottle rests.

While feeding the baby it is well occasionally to withdraw the nipple from the mouth to permit air to enter the bottle, thereby giving it a little rest and preventing collapse of the rubber. After the meal, which consumes about ten or more minutes, the bottle should be withdrawn at once and emptied.

Pacifiers should never be given the baby, for if frequently used they lead to deformity of the jaws, and they are disease-breeders. The rubber nipple, often given it to keep it quiet, is harmful in that it sucks in air. The only pacifier permissible is a nursing-bottle filled with lukewarm, slightly cool boiled water.

It is imperative that all feeding-utensils be kept scrupulously clean. Directly subsequent to nursing, the bottle should be thoroughly washed with soap and warm water and scrubbed with a brush. The nipple also should be scrubbed inside with a sterile gauze by inverting it. Then both should be boiled for ten minutes.

The bottle-brush must be thoroughly cleansed after use. It is well to keep the nipple in a solution of boric acid in a covered dish until it is used again.

If one of the foods on the market be advisable by reason of some peculiarity of the baby, the physician is the one to make the selection.

It is advisable to use no other food than milk until the child is one year old, except some orange-juice once a day, given at least one hour before or after the bottle. Starch is especially deleterious, as even after the age of four months the child's power of digesting it is markedly limited. If the baby is delicate, however, the diet may be increased by medical advice. When the baby is a year old he may begin to take from a spoon, eggs, beef-juice, and a small amount of starchy food.

Until one and a half years the meals should consist of:

(1) Breakfast (6-7 A. M.): (a) stale bread soaked in a glass of milk;

(b) porridge, cooked for two hours at least, of oatmeal, hominy, or wheaten grits, etc.; (c) bread, broken into soft-boiled or a poached egg, and a glass of milk.

(2) At 10 A. M. a glass of milk.

(3) Dinner (1:30-2 P. M.): a glass of milk; also (a) soft-boiled egg and thinly buttered stale bread; (b) bread or rice or grits, moistened with gravy (no fat), beef-tea, beef-juice; also a little junket or rice-sago or tapioca pudding.

(4) At 5 P. M. a glass of milk, perhaps with bread.

(5) At 9 or 10 P. M. a glass of milk.

At the age of two years the diet is slightly increased. The baby is allowed boiled rice or mashed baked potatoes, or mutton or chicken broth, or minced white meat of chicken, turkey, fish, or minced rare roast beef, beefsteak, mutton or lamb. After this age there is a further increase by the addition of solid meat food and fresh or stewed fruits in moderate amount.

Baby Boarding System of Milwaukee To be Made a Model.

The Child Hygiene Bureau of the Health Department, in co-operation with the Juvenile Protective Association, is planning to enlarge and perfect the baby boarding system of Milwaukee. Each year many children who cannot be cared for in their own parental homes must be boarded in private boarding homes or in institutions. This year the number has been largely increased, because the influenza epidemic has made many children orphans and half-orphans

who cannot be cared for in their own homes. The institutions are already over-crowded and provisions must be made for boarding more of these children in private homes. Even the institution people admit that a child is far better off living in a private home than in the best institutions. Many good women of the city take these children into their homes to board, mothering and caring for them until permanent provision can be made for them. The board for the

children is paid by the parents, guardians or an organization. The law provides that all baby boarding homes must be supervised, and hence licensed by the Board of Health; there is no charge for the licenses.

The nurses of the Health Department supervise the children in these boarding homes, in order to insure for them the best possible care.

The Health Department needs more good baby boarding homes, so any women who would like to take children into their homes to board may make application to the Child Hygiene Bureau of the Health Department, City Hall, telephone Broadway 3715, for a license. Any parent

or guardian having a child whom they wish to board may make application at the Juvenile Protective Association, room 606, 432 Broadway, telephone Broadway 3356.

The plan is to prevent the boarding of children where arrangements can be made to keep the child in its own home. No boarding home should accept a child unless it is accompanied by a Health Department permit, authorizing the parent or guardian to place it in a boarding home. The Health Department is determined to give first consideration to the rights of the child. The rights of the parents and boarding homes will have to be given second consideration.

In advising people to let patent medicines alone we do not always mean to imply that patent medicines have no merit whatever, because there is scarcely anything under the sun that isn't good for something. We object to the use of patent medicines mostly because their exaggerated claims entice people to use them, who are not sick at all, or who are too sick to be losing valuable time by experimenting with some patent medicine, that may make their condition worse. As an example, a man with Bright's Disease may not feel well. He is induced to try some patent medicine that contains a large percentage of alcohol. The alcohol will irritate his kidneys and cause them to become more inflamed. As a result, his kidneys will be less able to do their work, and he is in danger of

falling into a uraemic coma, from which he will never awaken.

All patent medicines may be good for something, but none are good for everything, for everybody and for every time, as they nearly all claim. If someone bottled some of our Lake Michigan water, called it by some fancy name, we are certain that many wonderful testimonials could be obtained, from mentally cured patients, especially if our drinking water had some of its former carbolic acid taste and odor.

Another fact for patent medicine addicts to realize is that drugs, if given in improper doses and at improper times, may cause illness and even death. Any drug, to be of much value in the combatting of disease must be given in a large enough dose to have a physiological effect, and a

small enough dose not to have a pathological effect. This dosage can only be determined by someone who has studied the patient as well as the drug, namely a Doctor of Medicine. We will admit that most patent medicine vendors do not put enough active drugs in their concoctions to kill anyone, even if the entire bottle were taken at one dose, although one might become intoxicated. If you must die, the patent medicine man would rather have you die because you got too little of his stuff instead of too much.

Selecting at random a few advertisements appearing in our local papers, we offer herewith some safety first opinions with regard to the same.

An advertisement under the head-

nervousness, sleeplessness and general weakness, owing to its remarkable flesh growing properties, it should not be used by anyone who does not desire to put on flesh."

Here is a concern actually honest enough to admit that their stuff will make thin people fat, but not fat people thin. Bitro-Phosphate would be in much greater demand if thin people could take it, feeling that if they got too fat, they could get thin again by taking more Bitro-Phosphate.

Our advice is just the reverse of what the Bitro-Phosphate people give you. If you are thin, do not take Bitro-Phosphate, but go to a doctor and find out why you are thin. You may have beginning tuberculosis. If you are stout you are probably well and may more safely experiment with Bitro-Phosphate.

Next we read: "Doctors Stand

Amazed at Power of Bon-Opto to Make Weak Eyes Strong, According to Dr. Lewis. Guaranteed to Strengthen the Eyesight 50% in One Week's Time in Many Instances." Further down in the advertisement we read:

"If your eyes bother you even a little it is your duty to take steps to save them now before it is too late. Many hopelessly blind might have saved their sight if they had cared for their eyes in time."

We agree with this statement. The only difference is that the advertiser wants you to stake your eyesight on Bon-Opto, while we urge you to consult an eye specialist when your eyes bother you.

Opto cures.

Next we find the much advertised Benetol. This preparation, according to "Nostrums and Quackery," published by the American Medical Association in 1912, page 584, "is a simple solution of the well known substance alpa-naphtol in the still better known substances, glycerin, soap and water."

Prof. H. C. Carel, who is given credit for discovering this mixture of well known substances, severed his relation with the University of Minnesota several years ago when he exploited "Hygenol," a hair restorer. Any professor who can cure baldness has our admiration, because that is more than we can do.

However, when it comes to antiseptics, germicides and the like, we would much rather rely upon our old remedies than to experiment with the so-called new discovery Benetol.



PUBLIC HEALTH CLIPPINGS

FACTORY CONDITIONS AND
TUBERCULOSIS.

Using pre-war statistics and personal observations of factory conditions, Professor Moore has written a very excellent article showing the effect of urban employment upon the incidence of pulmonary tuberculosis. The need for a National Industrial Health Service is effectively argued, setting forth a constructive program, calling for 1,500 full-time physicians to carry out the plan of action. The big outstanding feature of this article, and a powerful argument in favor of the above services, is that city males in the working age period (25-65) have a death rate from tuberculosis double that of city females and rural females and males in the same age period. Professor Moore believes that working conditions and lack of adequate medical supervision are responsible for this condition. His statements are supported by four charts illustrating contrasts in death rates in different age periods and in urban and rural districts.—Benjamin Moore, *Lancet* (London), Nov. 9, 1918, p. 618. (P. M. H.)

COMPARATIVE CASUALTIES OF
WAR AND INDUSTRY

An interesting comparison of war and industry was that the army of three million Pennsylvania workers suffered 577,053 casualties during the two and one-half years period ending July 1, 1918, with 7,575 fatalities, which is greater than the entire army that Canada and Pennsylvania has

sent against Germany. One report was that out of every thousand cases of disability in industry, 547 are cases of disease and 453 are cases of wounds and injuries. Interesting comparisons are also made covering amputations, blindness, and extreme mutilations. This bulletin is also devoted to a discussion of occupations for the disabled.—The Bulletin, Pennsylvania Department of Labor and Industry, Vol. V, No. 2, 1918, pp. 121-124.

Good health—good active, aggressive health—is the most important thing in the world. * * * Good health is the most important thing in the world, not only for its own sake, but for the larger reason that the full and complete measure of the success of every human enterprise depends upon the quality endurance of the good health that supports it. The measure of your success depends upon the sort of health that backs up your enterprise, whether it be mental, moral or physical.—Dr. Thomas A. Storey in "How to Live."

Disease germs and the foulest atmosphere, like the rest of nature, are no respectors of persons or places, and it is only when our sanitation becomes world-wide, and cleans up all the foul disease-producing spots of earth that it will attain its highest efficiency.—Michigan Public Health.

If we want to Americanize our foreign population, we must give them American houses to live in.

MILWAUKEE HEALTH DEPARTMENT SERVICE DIRECTORY.

Sixth floor City Hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:

Tuberculosis Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

CHILD WELFARE.

Third Ward School.....	Jackson and Detroit Sts.
Thursday mornings, 9 A. M. to 10 A. M.	
Forest Tome Ave. School.....	Tenth and Forest Home Ave.
Wednesday mornings, 9 A. M. to 10 A. M.	
Fifth Avenue School.....	Fifth and Hayes Ave.
Friday mornings, 9 A. M. to 10 A. M.	
Abraham Lincoln House.....	Ninth and Sherman Sts.
Wednesday afternoon, 1:30 P. M. to 3 P. M.	
Weil St. School.....	Weil and Lee Sts.
Thursday afternoons, 2:00 P. M. to 3:00 P. M.	
St. Hedwig's School.....	Brady and Racine Sts.
Friday afternoon, 3:00 P. M. to 4:00 P. M.	

TUBERCULOSIS.

Eighth Floor, City Hall:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

South Side Dispensary—Woolworth Building, Fifth Avenue and Mitchell Street:

Thursday evening, from 7 to 9 o'clock, for children.

North Side Dispensary—Fourth Street and Reservoir Avenue:

Wednesday morning, from 10 to 12 o'clock.

Service at these clinics is rendered without charge and any person may visit the clinics and consult with the physicians in charge.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 60.
Visiting Hours, 2:30 to 4 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.
Visiting Hours, Sunday, 3 to 5 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.
Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.
Emergency Hospital.
South Side Contagious Disease Hospital.
Union Pharmacy, 1120 Walnut St.
Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HOW TO LIVE.

LESSON IV.



EXERCISE.

Life is motion; inactivity means death; don't be a dead one.

Good health requires exercise; exercise stimulates circulation, respiration, and the activity of the digestive system—the great trinity for life and health.

The brain worker and people of sedentary habits are especially in need of daily physical exercise.

Exercise should be taken regularly, systematically, and in moderation.

Exercise should take in every group of muscles in the body—the setting-up exercises of the Army are excellent for this purpose.

Exercise in the open whenever possible; walking, skating and swimming are among the best of out-of-door exercise.

Do not exercise immediately before or immediately following a meal.

Let your exercise be a pleasure, and pleasure exercise.

EXERCISE FOR FIVE MINUTES EACH MORNING UPON GETTING UP, WITH WINDOWS WIDE OPEN AND UNHAMPERED BY CLOTHING.

Milwaukee Health Department.

Ordinance You Ought to Know.

GARBAGE BOXES.

Section 863. (As amended, Ord. 41, May 10, 1915.) All garbage boxes or cans hereafter to be provided in the city of Milwaukee shall be metal or metal lined and water-tight, with a fly-tight and water-tight metal cover, and shall have a capacity of at least ten gallons for each family, resident upon the premises; provided that wooden receptacles of similar capacity, that are water-tight and are provided with a water-tight cover, may be used during the months beginning December 1 and ending March 1.

Garbage boxes or cans must be provided by the owner of the property in every case where more than one family only is resident upon the premises. Garbage boxes or cans shall be placed at a point on the premises most accessible to the person collecting the garbage and offal.

The word "premises" as used in this section, shall mean a parcel of land, whether composed of one or more city lots, upon which any building or group of buildings is located, and it shall expressly apply when more than one building is located upon a lot or lots under a single ownership or management.

For Garbage Collection call:

Complaint Clerk, Dept. Public Works,
Broadway 3715.

614.09
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SEP 10 1919

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

MAY 1919.

Vol. 9, No. 5.

SANITATION Is Simply
CLEANLINESS.

U. S. P. H. S.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIDGE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MAXINE BIEBESHEIMER, R. N., Supervisor of Nurses.

ORDINANCES YOU OUGHT TO KNOW.

Throwing Filth, Rubbish or Nauseous Substances on Streets, etc.

Section 865. It is hereby made unlawful for any person, firm, or corporation, or for any officer, member, agent, servant or employe of any firm or corporation to place, throw or leave any slops, dirty water or other liquid of offensive smell, or otherwise nauseous or unwholesome, or any dead carcass, carrion, meat, fish, entrails, manure or other nauseous or unwholesome matter or substance, or any rubbish, ashes, paper, dirt, stones, bricks, manure, tin cans, boxes, barrels, or other substances whatsoever, or to circulate or distribute any circular, hand bills, cards, posters, dodgers or other printed or advertising matter, in or upon any sidewalk, street, alley, wharf, boat landing, dock or other public place, park or ground, within the city of Milwaukee.

Receptacles for Ashes, Rubbish, etc.

Section 866. It shall likewise be unlawful for any person, firm or cor-

poration, or for any officer, member, agent, servant or employe of any firm or corporation, to place, deposit, throw, keep, permit or maintain any rubbish, ashes, paper or manure in or upon any lot, yard, block or enclosure within the city of Milwaukee, unless the same shall be securely enclosed and safely covered in a box, bin, can or barrel.

Sweeping Sidewalks Without Sprinkling.

Section 1293. It is hereby made unlawful for any person to clean or sweep any sidewalk on a business street, unless it shall have been first sprinkled with water sufficient to avoid the raising of dust while being cleaned or washed, excepting at such times as when such sprinkling would be impossible on account of frost.

It shall be unlawful for any person to sweep carpets, rugs or mats, or to deposit rubbish, dirt or dust on any sidewalk.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

MAY 1919

THE CLEAN-UP CAMPAIGN.

By George C. Ruhland, M.D., Commissioner of Health.

The week of May 19th to 25th has been designated for this year's annual clean-up campaign.

So far as personal cleanliness is concerned, it may be safely stated that his majesty, the American Citizen, is among the cleanest of the clean.

While there are no statistics available to prove this assertion it seems, nevertheless, inferentially justified, for the people of no other nation use water so extravagantly as we do, nor can they boast of such general installations of bath facilities in private home or public hotel as can the American.

It is rather difficult under the circumstances to accept the fact that despite so much apparent appreciation of external cleanliness, we continue rather indifferently so far as the external appearance and cleanliness of our cities is concerned.

The approaches into most of our American cities through back yard districts that add to the unsightliness of hideous billboards, dilapidated fences and buildings, the offense of stench from waste products and refuse, are notoriously disillusioning.

For are the bad first impressions much improved when even in our best thoroughfares and business streets promiscuous spitting on sidewalks and the litter of waste paper cause no comment.

The truth of the matter is that though we insist upon cleanliness and the nicety of things within our homes, we seem to care but little what happens outside of them.

This is a very unfortunate attitude which should be corrected. While it is true that appearances may be deceiving, yet first impressions are apt to prove lasting or at least profoundly prejudicial.

Today, while the eyes of practically the entire world are upon us, it behooves the American citizen to set a good example. If the American idea is to represent the ideal in life, let this ideal include cleanliness, not only of methods and personal habits, but also in community life.

Let us teach the American ideal by demonstrating it and living it. Let us demonstrate that it means cleanliness in all matters and things.

The home that is kept clean and free from rubbish not only will mean better health for its occupants, greater freedom from fire hazards, but it will also add to the moral tone of its tenants.

What is true of individual homes is even more true of the city. Clean streets, and homes that are in good repair, and business and factory kept spick and span, will go a long way in making for a healthier, safer, wealthier community, and elevate the moral tone of citizenship.

Let everybody get busy and help make Milwaukee a cleaner, safer and more attractive city.

Get rid of all rubbish. Clean, scrub and paint the house inside and

out. Clean up back yard and front yard. Fix up the garden. Plant flowers. Set a good example to your neighbor.

Boost the clean-up campaign.

CLASSIFICATION OF SCHOOL CHILDREN ACCORDING TO MENTAL AGE.

By *John P. Koehler, M.D.*, Deputy Commissioner of Health.

When a child enters school, almost the first question asked is: "How old are you?" Where the law requires a certain age before one can vote, such a question is important, but we believe that its importance is overestimated in the classification of school children.

Whether a child was born in 1913 or 1914 should not be the deciding factor in determining whether the child should be placed in the Kindergarten or First Grade. Classification according to birthdays is the quickest way to dispose of children when they first enter school, but not the most accurate way. School work is carried on by the mind and not by the age of the pupil. Just as children of five years differ physically, so they differ mentally. If they were to do physical work, they would be classified according to their physical measurements. Since they are to do mental work, they should be classified according to their mental measurements.

When a child enters school its mental age should be determined by applying the Binet tests or modification thereof. These examinations should be made by an experienced mental analyst. If a child's mental age is behind its chronological age, the examiner should ascertain the

cause of retardation. The child may have some physical defects, such as poor eyesight or poor hearing, that have interfered with normal mental development.

Home environment must be given consideration. A child with good home surroundings and educated parents, has a distinct advantage in passing the Binet tests, over the child that has very little opportunity to learn at home. Heredity also plays an important part in the mental development of a child and therefore ought to be considered before deciding on the present as well as future mental capacity of a child.

These mental examinations of children ought not to be made only when a child first enters school, but should be made every two or three years in order to be accurate. A child may be mentally retarded at five years and be normal at seven or eight years, or it may be normal at five years and retarded at seven or eight.

If the teacher has before her the mental age of every pupil she will more intelligently know what to expect from each child.

Jim may be a big boy and if counted, ought to head this class. But school work is done by the mind and not the body. Jim, mentally, is the smallest child in his class.

Therefore, the teacher must expect him to be last instead of first.

Mary is the oldest, chronologically, in her class, but mentally, she is the youngest. Since school work requires mind and not years, Mary cannot be expected to keep up with her class, just because she is older in years.

In the past, teachers have based their demands entirely too much on the size and chronological age of the school child. As a result of this, they have discouraged children that deserved encouragement. They have

been impatient where they should have been patient.

It is no wonder that children who couldn't wait until they were old enough to go to school, in time became so discouraged that they couldn't wait until they were old enough to leave school to go to work. It is no wonder that it is now necessary to have a "Back to School Drive."

Unless the teachers give children mentally retarded a square deal, they will drive them out of school much faster than any power can drive them back.

FATIGUE AND EFFICIENCY.

With the end of the war the problems of industry press for solution more earnestly than ever, and one of the most timely of these problems concerns the physiological aspects of the work of the human machine. Upon us in America, where industry is destined to lead the world, there is imposed a grave duty—that of directing investigation along such lines that empiricism and tradition, those two obstacles to progress which have long been potent in industrial evolution, shall be cast out and industry shall be placed permanently upon a scientific basis.

Under the title of Industrial Physiology, Frederic S. Lee, Ph. D., Professor of Physiology in Columbia University, and Chairman of the Committee on Fatigue in Industrial Pursuits of the National Research Council, presents a most interesting study of the influences of fatigue on efficiency. Carefully measuring the output of successive hours of the working day in different types of operations and

plotting the daily curves of the output, his studies show a reduced efficiency as the day proceeds in the various kinds of pursuits studied, due to the fatigue influence. His conclusions must be of greatest interest to the employer of labor as to labor itself. The report continues:

Reduction in the length of the working day is characterized by an increase in the output of the successive hours and usually by a total increase in that of the day. The optimum duration of work probably varies with the character of the work itself.

The introduction of resting periods in the working spell is accompanied, especially where the working day is long, by a total increase in the day's production. A five-hour working spell, unbroken by resting periods, is probably always too long.

Overtime following a day of labor is inadvisable, as is also Sunday work following a week's labor. These tend to impair the working power of the worker.

A hot day tends to impair strength and reduce output. Every effort should be made to keep the body of the worker cool.

Night work is, in general, less efficient than day work. Its total output is less, and this, with a long working night, falls off enormously in the early morning hours. Alternation of periods of night work with periods of day work is more profitable than continuous night work.

Women are capable of performing a much greater variety of industrial operations than has heretofore been recognized. They should not be employed for night work. Statistics show that they are absent from their work more frequently than men. The problem of women as compared with men in industry is not that of their greater or less general efficiency, but rather a problem of what types of work each sex is best fitted for.

Accidents to workers are a grave source of inefficiency. They are caused by fatigue, inexperience, speed of working, insufficient lighting, high temperature, and other factors. Many industrial accidents are preventable, and adequate provisions for first aid measures tend to diminish the seriousness of accidents.

Food and efficiency are directly connected with one another, and suitable and adequate food can probably be best provided through the establishment of industrial canteens.

A high labor turnover is incompatible with the highest degree of efficiency. It is expensive, in that it imposes upon the employer the necessity of training new workers, and it is a serious factor in the causation of accidents.

Physiological analyses of certain operations have been made, by means

of the cinematograph and other methods, and it has been found possible to eliminate unnecessary motions and to train workers so as to secure a more regular rhythm, such measures increasing efficiency.

The self-limitation of work on the part of workers has been studied and found to be very common. Every legitimate effort should be employed by foremen and managers to eliminate this and to induce workers to work up to their physiological capacity. Driving workers beyond their physiological capacity defeats its own ends.

"A MAN'S A MAN FOR A' THAT."

Do you think of your Italian acquaintance as a "Dago?" Marconi is of the same race. Do you refer to your Polish neighbor as a "Polak?" Paderewski is a Pole. Are your Scandinavian fellow-workers "square-heads" in your mind? The inventor of dynamite and the armored battleship were men of that stock. And this argument applies to every race that has found a home in America. It is wrong thinking to use slurring names, even in your mind, about the men of another race. Think straight, and judge a man by his character, not by his birthplace.

The way you meet and greet a fellow worker can make a friend or enemy of him. You know that. But do you know that if he is a foreigner it can do more? It can make him more friendly to America, or it can make him more hostile to America. Why? Because the foreigner most judge America mainly by the Americans he meets and the way they greet him. Put a smile in your voice. Don't make "good morning" sound like "bad 'cess to you."—Exchange.

OBSTACLES TO HYGIENE.

From "*How to Live.*"

It is not enough that the individual should know how to live. Knowledge is of no avail without practice. Mr. Moody, the evangelist, once said of religious conversion, "Merely to know is not to be converted. I once boarded a train going in the wrong direction. Some one told me my mistake. I then had knowledge, but I did not have conversion until I acted on that knowledge — seized my traveling-bag, got off that train, and boarded one going in the opposite direction." Many people are on the wrong train in hygiene, as in religion, and know it. They are traveling fast to that kind of perdition which in the end unhygienic living always brings. In fact, a great many people practice unhygienic habits more through indifference than through ignorance. Most people have acquired, by imitation of their neighbors, a great number of unhygienic habits and have continued in these habits for so many years, that they can not get rid of them, except through a great effort of will. This effort they are usually unable or unwilling to put forth unless very strong incentives are brought to bear. Often—in fact, if the truth were known, usually—they wait until ill health supplies the incentive. The man who is most receptive on the subject of health conservation, is, in a majority of cases, the man who has just had some ominous warning of coming ill health; although there is now a small but increasing number who do not wait so long, men

who pride themselves on keeping "in the pink of condition." These are the men who are rewarded for their efforts by enjoying the highest reaches of working-power.

The ordinary man, in ordinary good health, does not want or thinks he does not want to live hygienically. He sees all sorts of imaginary objections to adopting a hygienic life, and closes his eyes to its real and great advantages. One of the objections often trumped up is that the practice of hygiene costs too much—that it can only be a luxury of the rich. It is quite true that here, as elsewhere in human life, wealth confers great advantages. The death-rate among the rich is always less than that among the poor. And yet the rich have unhygienic temptations of their own, while the poor, on their part, are far from living up to their opportunities.

There are really only two material disadvantages from which the poor suffer in their opportunities to live a healthy life: One is unhygienic housing, both at home and at work; the other is unhygienic toil. It must be admitted that millions of unfortunates are unable individually to remedy these disadvantages in their lot of life. Yet they can, even in these two respects, accomplish much if they take an intelligent interest in hygiene. The graduates of tuberculosis sanatoria are largely among the poor and they are doing much good missionary work in securing better ventilation, both in the home and in

the workroom. They find this possible partly by insisting on more open windows in home and workshops, partly by changing their home to one better equipped with windows or situated in the suburbs instead of in the city, partly by changing their occupations, partly by getting the co-operation of their employer or simply by co-operating with him when he is ready to do his part. The workman can also accomplish something

through the Trades Unions, especially in regard to hours of work. Employers will increasingly co-operate in this movement, as they come to realize that the securing of efficiency in their workmen is to their interest, and that monotony, long hours, and other unhygienic elements which are now, through sheer carelessness, often imposed on their workmen, bring back in the end big financial losses on themselves.

NEW CURE FOR TUBERCULOSIS.

By John P. Koehler, M.D., Deputy Commissioner of Health.

There are about as many tuberculosis "cures" on the market as there are tuberculosis cases. Although not a specialist on tuberculosis cases, I consider myself a specialist on so-called tuberculosis cures, especially the patent medicine kind. I have studied them all. I am calling my cure a new cure because most people still consider tuberculosis incurable and any treatment pretending to cure is new to them. The next best thing to not having tuberculosis at all, is to discover it early when you have it. The surest cure for tuberculosis is an early diagnosis.

Years ago tuberculosis was considered incurable because a positive diagnosis was only made a few days before the patient died, or on post-mortem examination.

A patient with symptoms of appendicitis is seen two or three times a day by the physician in order to lose

no time if the removal of the appendix becomes necessary. If the physician on his first visit would have said: "It looks a little like appendicitis, if you don't get along alright come in and see me some time," we would find that a neglected case of appendicitis is just as incurable as a neglected case of tuberculosis.

There are many diseases which are considered minor diseases by the laymen, yet which if not treated early are more dangerous than tuberculosis. Most of us have had tuberculosis some time or another, so that really very few people die of tuberculosis when we consider the number who have had it.

Don't be afraid to go to a physician when you don't feel right, because you fear that he might make a diagnosis of tuberculosis. Remember that an early diagnosis is a cure for tuberculosis.

WANTED: MORE NEIGHBORHOOD PARKS.

HOW TO REDUCE THE DEATH RATE OF BOTTLE-FED BABIES.

By John P. Koehler, M.D., Deputy Commissioner of Health.

Statistics tell us that a bottle-fed baby has about one-fifth as much of a chance of living as a breast-fed baby. Statistics, however, showing the high death rate of bottle-fed babies, are of little value if nothing is done to reduce that death rate.

The first step to take is to make it easier for a mother to nurse her baby, and more difficult to put it on a bottle.

No baby under six months ought to be put on the bottle if its mother is able to nurse it. Whether a mother can nurse her baby or not ought to be decided by her physician and not by her friends or relatives.

A law should be passed which makes it a crime for a mother to put her baby on the bottle without the written permission of a physician.

Every physician should be informed by the health authorities that no child should be placed on the bottle for social or economic reasons, but only for medical reasons. No mother should be permitted to put her baby on the bottle to die because she must go out and work, to live. What helpeth it a mother if she gain the whole world and loseth her child? Every mother with a nursing baby should have a pension if she needs it.

Whenever a physician gives the mother a permit to place her baby on the bottle, it should be so reported by the physician to the Child Welfare Division of the Health Depart-

ment. This will always remind the physician that taking the baby from the breast is serious enough to require the attention of the Health Department. It will also keep us informed as to what physicians give the most bottle feeding permits.

When we are convinced that we, as child welfare workers, have done everything to keep the baby on the breast, we must see what can be done for the child on the bottle.

The mortality rate among bottle-fed babies is high, not because nothing can be found to replace mother's milk as a food, but because to replace it requires so much more work and intelligence than the average mother is able to give. A healthy baby put on the bottle and supervised by a physician who is interested enough in infant feeding to study at least the underlying principles, will usually live in spite of the bottle. When a baby is on the bottle it ought to be seen at least once a week by a physician or experienced nurse.

No permit should be given a mother to put her baby on the bottle, until definite arrangements are made to provide for the supervision of the child when on the bottle. A baby on the bottle without proper attention is more apt to die than one with scarlet fever or other contagious disease. In some homes the best infant feeding specialists cannot get results because there is no one in the home

intelligent enough to carry out his instructions. A baby in such a home has a poor chance of surviving unless it is seen daily by a nurse who makes up its feeding, or it is taken to some institution.

In conclusion we wish to recapitulate by singing our old refrain:

When you get ready to give more money and better laws, we will be ready to give you fewer deaths and better babies.

CARE OF THE HAIR.

From "*Personal Hygiene.*"

A fine head of hair is a possession universally prized, and one which is frequently neglected by its owner as often through ignorance as through carelessness. In the preservation of the hair some persons have a great natural advantage over others. If there is an inherited tendency to baldness, as shown by a thin and poorly nourished scalp, there will be greater difficulty in perserving the hair than otherwise.

The scalp is comparable to the soil. Neither hair nor plants will grow luxuriantly if the quality is poor. A scalp which is favorable to the growth of hair is thick and pliable, and moves freely over the bones of the skull beneath. If the scalp is very thin, the blood-vessels contained will be few in number. If it is drawn tightly over the skull, it will tend to constrict the blood-vessels, lessen the supply of blood to the scalp, and cause atrophy of the roots of the hair from pressure. The two principal causes which bring about a premature thinning of the hair are a deficient circulation of the blood in the scalp and the constant presence of dandruff.

Dandruff is a collection of epithelial scales mixed with dried sebaceous matter, and it is the fore-

runner of premature baldness in a large percentage of cases. It will be present to a greater or less degree in many scalps unless it is constantly guarded against. It is highly important to keep the scalp perfectly clean and free from dandruff, and to attain this end daily brushing of the hair and frequent shampooing are necessary.

The hair should be brushed morning and night for several minutes until there is a feeling of warmth in the scalp and all particles of dandruff are removed. For an adult the brush should be a stiff one, with the little tufts of bristles widely separated to facilitate cleaning. For children and for those with very sensitive scalps, softer brushes must be used. Brushes should never be so stiff nor the brushing so vigorous as to produce any soreness of the scalp. Brushes should be frequently washed in water containing a little ammonia, and then dried in the sun with the bristles down.

Combs are chiefly useful for disentangling snarls and dressing hair, and may be employed with the brush. The teeth of the comb should be wide apart, have blunt ends, and be free from any irregularities which might tear the

hair. In no case should the old-fashioned fine-toothed comb be used, as it pulls out the strong hairs, especially if the growth is luxuriant, and the fine points may produce disease of the scalp from irritation.

Many persons are morbidly afraid that any considerable amount of brushing and combing will cause a serious loss of hair. Its effect, however, is just the opposite and increases the growth of hair by stimu-

lating the circulation in the scalp and by removing dandruff. Brushing removes many loose hairs which are ready to fall, but their place will soon be taken by new and more vigorous ones. The groom knows by experience that the only way to keep the coat of his horse thick and glossy and in a healthy condition is to constantly use the currycomb and brush, and that he is not likely to use either too much.

PATENT MEDICINES

By JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

This issue of the Bulletin is the "Clean-up" number. There is one place in almost every home that ought to be "cleaned up" or "cleaned out" at least once a year, and that is the family medicine cabinet.

So many families have a habit of saving medicines for future use, not only patent medicines, but also drugs prescribed by physicians. Some mothers are giving baby the same medicine that the five year old child took when it was a baby.

Most drugs will deteriorate with age and some will even become injurious.

One of the drugs found most frequently in the medicine cabinet is the much advertised Aspirin. This drug is an old friend of ours. We prescribe it almost every day, not by the patented name of aspirin but by the name of "acidi acetylo-salicylici". Aspirin ought to be used only under the direction of a physician.

The Bayer people are advertising Aspirin in the daily papers as

though it were a food instead of a powerful drug.

Aspirin is used by many people for a headache. Headache is only a symptom. If the headache is due to indigestion the indigestion ought to be treated. Aspirin will not help the indigestion, but in most cases make it worse. The headache may be due to poor circulation. Aspirin will not improve the circulation, but on the contrary, in many cases will impair it.

The writer has seen cases where Aspirin had a very depressing effect on the heart. When you buy a box of five grain Aspirin tablets with enclosed directions, telling you to take from one to three tablets, we would make use of an old proverb, somewhat revised, and advise: When you take one tablet, pray once; when you take two, pray twice; but when you take three, pray three times. In other words, there is danger in the indiscriminate use of drugs, whether the drug be Aspirin, Tanlac, Nuxated Iron, arsenic or morphine.

A city that neglects the health of its citizens cannot blame parents for doing likewise with their children.

VENEREAL DISEASE AND PEACE.

The sacrifices of the world war have not been without some compensation. Not the least among these is an enlightened opinion which must now be lined up behind the organized campaign to protect the youth of this country from venereal disease. Four million soldiers and sailors have, under the protection of the military authorities, received greater protection than received in civil life. The signing of the armistice in no way lessens the responsibility of protecting these boys from prostitution and liquor. Our states and cities ought never to lose the control which has been established over our youth. These communities to which the discharged soldier or sailor will return must be made safe.

Before the war, the physician and public health officer knew the part played by venereal disease in the production of our blind, our mental defectives, our surgical cases in women, locomotor ataxia, paresis, miscarriage, etc. But the people generally did not know these things and there was no enlightened public opinion back of measures instituted to suppress the evils responsible for them. The reports of our draft boards and camp surgeons have, however, made these matters plain to the layman, and the time is ripe for the program being enacted by the U. S. Public Health Departments. Let the medical practitioner sense his responsibility to lend a whole-hearted support.

— *Wisconsin State Medical Journal.*

A JURY IN DRY HUMOR.

A physician in North Carolina sends us a large advertisement of "Paw Paw Tonic," from which we learn—in 24-point black face capitals—that the "tonic" contains "no alcohol." One gathers from the less prominently featured parts of the advertisement that the preparation does, however, contain port wine! This, in a way, prepares one for the newspaper item which the same correspondent sent in forty-eight hours later, detailing the conviction of a Charlotte, N. C., druggist of selling this non-alcoholic "tonic" to young men, who oddly enough, after partaking of it became drunk and disorderly. Counsel for the druggist maintained that if "Paw Paw Tonic" were taken according to directions the medicine would not produce intoxica-

tion. But by an unfortunate *faux pas*, the young men failed to follow directions. Thus far the story is commonplace. The unusual feature in the case is the judge's charge to the jury. He instructed these twelve good men and true to decide whether or not a "patent medicine," which when taken in liberal quantities will produce intoxication, is an intoxicating liquor. The jury decided that such a "patent medicine" is an intoxicating liquor! Should this common-sense and rather obvious finding of the jury be held by the courts for the country generally, the large business that purveyors of alcoholic "patent medicines" are expecting to develop after July 1, 1919, will fail to materialize.—*Journal A. M. A.*

PUBLIC HEALTH CLIPPINGS

"Why don't they keep the streets a little cleaner"

You ask with deep annoyance not undue,

"Why don't they keep the parks a little greener?"

Did you ever stop to think that
THEY means YOU?

GARTERS.

Any article of clothing which unnaturally constricts a portion of the body is harmful and unhygienic. The circular elastic garter acts as a constant tourniquet about the leg and interferes with the circulation of blood in the veins. These will tend to dilate after awhile and become tortuous, giving rise to the condition known as varicose veins. The dilated veins generally prove to be sources of considerable annoyance, and at times of danger. Instead of using circular garters, the proper plan is to suspend the stockings from some part of the underclothing.

VACCINATION AS A WAR MEASURE.

Dr. Maurice Ostheimer of Philadelphia stated that there was not the slightest doubt that smallpox had increased during the period of the war throughout the United States, and in a great many instances the spread of the disease was definitely to be attributed to unvaccinated workers in the industrial plants making munitions. In some instances a migrating unvaccinated worker developed smallpox, gave the disease to one or

more workers in one, two, or even three plants before he was caught and isolated. In Philadelphia alone up to October 18, 1918, there has been thirty-three cases of smallpox reported, while there had only been twelve during the entire year of 1917 and only five in 1916.—Medical Record.

ROBBERY DE LUXE.

The National Association for the Study and Prevention of Tuberculosis is authority for the statement that not less than \$20,000,000 is invested in the business of manufacturing and exploiting fake cures for consumption. It is also estimated that the annual income from these concerns and individuals is not less than \$15,000,000. Of this amount, about \$5,000,000 is spent for advertising, leaving the tidy sum of \$10,000,000 as profit.

As no bottled goods have ever cured consumption, the \$15,000,000 represents nothing but blood money robbed from the unfortunate.—*N. C. Health Bulletin*, Oct., 1918. (M. T.)

It is just as foolish to expect to keep well and strong while living daily in foul, dirty air as it is foolish to try to keep in good condition by eating three times a day meals prepared from food materials which are not fit to eat.

When people go to their physician to be examined and not simply to get dope, we will have but few deaths from tuberculosis.

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.

Sixth floor City Hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

Eighth Floor:

Tuberculosis Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

CHILD WELFARE.

Third Ward School.....Jackson and Detroit Sts.
Thursday mornings, 9 A. M. to 10 A. M.
Forest Home Ave. School.....Tenth and Forest Home Ave.
Wednesday mornings, 9 A. M. to 10 A. M.
Fifth Avenue School.....Fifth and Hayes Ave.
Friday mornings, 9 A. M. to 10 A. M.
Abraham Lincoln House.....Ninth and Sherman Sts.
Wednesday afternoon, 1:30 P. M. to 3 P. M.
Weil St. School.....Weil and Lee Sts.
Thursday afternoons, 2:00 P. M. to 3:00 P. M.
St. Hedwig's School.....Brady and Racine Sts.
Friday afternoon, 3:00 P. M. to 4:00 P. M.

TUBERCULOSIS.

Eighth Floor, City Hall:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

South Side Dispensary—Woolworth Building, Fifth Avenue and Mitchell Street:

Thursday evening, from 7 to 9 o'clock, for children.

North Side Dispensary—Fourth Street and Reservoir Avenue:

Wednesday morning, from 10 to 12 o'clock.

Service at these clinics is rendered without charge and any person may visit the clinics and consult with the physicians in charge.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 60.

Visiting Hours, 2:30 to 4 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.

Visiting Hours, Sunday, 3 to 5 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HOW TO LIVE.

LESSON V.



R E S T.

Activity must alternate with rest.

Rest is necessary to regain strength and rebuild the tissues broken down by work.

The most ideal form of rest is sleep; the best time for sleep is night when neither light nor noise disturb.

Eight hours of sleep for adults and ten hours for children is necessary on an average.

Fatigue is nature's warning to you that rest is needed.

Every four hours of work should be followed by a period of rest; for children every two hours of work should be followed by a period of rest.

It is well to rest after a meal to give the stomach a chance to do its work.

Fewer hours of sleep will be required and better rest secured by going to bed on an empty stomach, though occasionally a glass of milk taken before retiring may promote sleep.

GET EIGHT HOURS OF SLEEP REGULARLY.

Milwaukee Health Department.

Clean Up---Paint Up Week

MAY 19—24

Do Your Share to Keep Milwaukee Clean *Work Systematically—Follow This Outline*

Set your neighbors a good example.

Remove all rubbish from attic, cellar, closet, back yard, and area way. Have it sorted as explained below.

Remove and clean all carpets and hangings for the summer.

Scrub floors, hall-ways and all unvarnished wood-work thoroughly.

Use plenty of soap and hot water. Clean all windows and keep them open to fresh air and sunlight.

Ventilate damp cellars. Screen windows and doors. Paint or whitewash your buildings, bedrooms, cellar, fences, etc.

Paint and whitewash kill germs.

Put walks in first class condition. Plant trees, shrubs and flowers in suitable places. Keep your lawn in good condition.

Exterminate dandelions; salt cracks in sidewalks.

Sort and donate all salable junk to the Red Cross; place broken glass, crockery, tin cans and other rubbish in boxes for collection along street curbs. Collections will be made by the Department of Public Works according to the following schedule:

Wards.

Monday, May 19 1, 2, 3, 4

Tuesday, May 20 5, 12, 17

Wednesday, May 21 8, 11, 14, 23, 24

Thursday, May 22 9, 10, 15, 16, 19

Friday, May 23 7, 20, 22, 25

Saturday, May 24 6, 13, 18, 21

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SEP 10 1919

Bulletin

of the Milwaukee

Health Department

*Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.*

JUNE 1919.

Vol. 9, No. 6.

A new era of organized medical and health service is now opening. An awakened national conscience recognizes the right of every individual to be safeguarded so far as is possible against disease and to be scientifically cared for during illness.

The period of purely individualistic medical practice is passing. Today, the well informed public is thinking in terms of preventive medicine, diagnostic clinics, group practice, industrial hygiene and hospital care of the sick. The new order of things calls for a tremendous broadening of all activities serving the public health and public welfare.

O. F. BALL, M. D.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

LEOPOLD SCHILLER, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. T. THOMSON, M. D.,
Sanitation.

C. D. PARTRIGDE, M. D.,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

MAXINE BIEBESHEIMER, R. N., Supervisor of Nurses.

ORDINANCES YOU OUGHT TO KNOW.

FOODSTUFFS TO BE COVERED.

Section 4601i. The display or storing of fruits, vegetables, or other food products on the sidewalk, or outside the place of business is hereby prohibited, unless such fruits, vegetables or other food products are securely covered by glass, wood or metal cases, or enclosed in tight boxes, bags or barrels, and all such cases and containers raised at least two feet above the sidewalk. The provisions of this section shall not apply to fruits or vegetables which are peeled or skinned before being used, or which are stored in tight barrels, boxes or crates.

or offered for sale, unless properly protected from flies, dust, dirt or other injurious contamination, by being suitably covered with a glass, wood or metal case or covering.

Section 4601l. The owner, manager or other person having charge of any grocery store, fruit store or other establishment where fruit, vegetables or other food products are sold, or offered for sale, who violates any of the provisions of this law shall be punished by a fine of not less than ten dollars or more than fifty dollars for each offense, or by imprisonment in the county jail to exceed sixty days, or by both such fine and imprisonment in the discretion of the court.

Section 4601j. No dairy or other food product which has been prepared for eating shall be displayed

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

JUNE 1919

THE POSSIBILITIES OF HYGIENE.

Certain it is that more people would practise hygiene if they could be made to realize in some vivid way how much they needed it. Few persons, even when they read and accept the statistics on the subject, really have a picture of the imperative need of hygiene as an integral part of every human life. It is not brought home to them how widespread is illness, how numerous are preventable deaths, how many are the tendencies toward individual and racial deterioration.

The report of the Roosevelt Conservation Commission on National Vitality, indicates that annually there are in the United States over 600,000 deaths which might be prevented if existing knowledge of hygiene were properly applied; that at least half of the 3,000,000 and more sick-beds constantly kept filled in the United States are unnecessary; that the financial loss from earnings cut off by preventable disease and premature death amounts to over \$1,500,000,000 annually; and that over 15 years are lost to the average life through the lack of application of knowledge which already exists but which simply has not yet been disseminated and applied.

The health examination of the Life Extension Institute have revealed unsuspected ailments in persons who considered themselves well, and to an extent which has as-

tonished even those who have long been familiar with these subjects. Among large groups of clerks and employes of banks and commercial houses in New York City with an average age of 27 and all supposedly picked men and women, only 1 per cent. were found free of impairment or of habits of living inviting impairment. Of those with important physical impairments, 89 per cent. were, prior to the examination, unaware of impairment; 16 per cent. of the total number examined were affected with organic heart trouble, 42 per cent. with arterial changes, ranging from slight thickening to advanced arteriosclerosis, 26 per cent. with high or low blood pressure, 40 per cent. had sugar, casts, or albumin in the urine, 24 per cent. had a combination of urinary and other serious impairment, 47 per cent. had decayed teeth or infected gums, 31 per cent. had faulty vision uncorrected.

Among industrial groups, not exposed to any special occupational hazard or poisoning, the figures were as follows: With an average age of 33, none were found to be free of impairment or habits of living inviting impairment. Of those with important physical impairments, 89 per cent. were, prior to the examination, unaware of impairment; 3 per cent. of the total number examined were affected with organic heart trouble; 53 per cent. with arterial changes,

ranging from slight thickening to advanced arteriosclerosis; 23 per cent. with high or low blood pressure; 45 per cent. had sugar, albumin or casts in their urine; 26 per cent. had a combination of urinary and other serious impairment; 69 per cent. had decayed teeth or infected gums; 41 per cent. had faulty vision uncorrected.

There are few persons in America today who reach the age of forty sound and normal in every part of the body, especially if we include among abnormalities the minor ailments. The extent to which minor ills are prevalent among those who pass for "well" people is not generally appreciated. Once we penetrate beneath conventional acquaintance we almost invariably learn of some functional trouble, such as impairment of heart, circulation, liver, kidneys, stomach; or gallstones, constipation, diarrhoea; or insomnia, neurasthenia, neuritis, neuralgia, sick-headache; or tonsillitis, bronchitis, hay fever, catarrh, grippe, colds, sore throat; or rupture, enlarged glands, skin eruptions; or rheumatism, lumbago, gout, obesity; or decayed teeth, baldness, deafness, eye ailments, spinal curvature, flat foot, lameness; or sundry other "troubles."

These ailments, though regarded as "minor," should be recognized promptly and accepted as the signal that the person is moving in the wrong direction. There is no need for alarm provided this warning is heeded. Otherwise disaster is almost certain sooner or later to follow. The laws of physiology are just as inexorable as the laws of physics. There is no compromising with Nature. No man can disobey the laws

of health to which he has been bred by Nature without paying for it — any more than a man can sign a check against his bank account without reducing the amount. He may not be immediately bankrupt, and until he exhausts his account he may not experience any inconvenience from his great extravagance, but Nature keeps her balances very accurately, and in the end all claims must be paid.

It is true, of course, that some persons have greater resistance than others. If we had a convenient barometer by which to measure daily the state of our vitality, we might register the effect of every unhygienic act. But it is so seldom that endurance is accurately measured that few people appreciate the enormous differences in people and the variations of the same person at different times. These differences and variations have a range of many hundred per cent. Some people cannot walk upstairs or run across the street without being out of breath, while others will climb the Matterhorn without overstrain. The fact that certain people have lived to the centurymark in spite of unhygienic living is sometimes cited to prove that hygiene is ineffective. One might as well cite the fact that certain trees are not blown down in a gale or are not quickly destroyed by insect-pests to prove that gales have no tendency to blow down or insects to destroy trees.

The truth is that a person who has so much vitality as to lead him to defy the laws of health and to think that he pays no price no matter how he lives, is likely to be the very man to exhaust his account of health prematurely. There was, a few years

ago, a famous American, possessed of prodigious bodily vigor. He ought to have lived a century. Unfortunately he had this "insolence of health." He was warned several times against overwork, lack of sleep, and abuse of his digestion. But he merely smiled and claimed that such warnings were for others, not for him. He met an untimely end, due as his physicians believed and as he himself acknowledged, when too late, to his abuse of the great powers with which Nature had endowed him and to the neglect of personal hygiene.

Conversely, an observance of the

laws of hygiene affords wonderful results in producing vitality and endurance. Insurance companies are discovering that even weak and sick people, will, if they take good care of themselves, outlive those with robust constitutions who abuse them.

As soon as an individual becomes interested in caring for his own health and for the health of his family, his interest will not cease at individual hygiene; he will wish to improve the efficiency of the public health service by increased appropriations, improved equipment and personnel; and to co-operate with the health officer.—From "How to Live."

SCHOOL HYGIENE NOTES.

BY JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

In the future we shall attempt to reserve at least one page in the Health Bulletin for School Hygiene notes. We are hoping that in time the School Hygiene work will require so much space in the Bulletin, that it will be necessary for us to get out another monthly bulletin devoted exclusively to school health work.

Children with defective teeth should have them corrected during summer vacation, when dentists are not so busy and when children can make appointments without missing any school work.

Why does the Health Department award a banner for the best attendance record? What has school attendance to do with health?

A child with bad teeth and a toothache ever so often is not apt to have a good attendance record.

A child with bad tonsils and ade-

noids will be absent on account of frequent colds. A teacher permitting a child who had the mumps or some other contagious disease to return to the class room before it has sufficiently recovered, will surely increase the number of absentees. By saving a day or two for the returned child, several children may lose weeks, by contracting the disease from the too early returned child.

A most certain way to reduce the number of absentees for the year, is not to permit the child that has been sick, to return to the class room until it has been examined by the school physician or nurse. No room or school can have a good attendance record, without having a good health record.

The schools have all worked so hard this month to win a banner, that we regret very much that we haven't more banners to award.

Every school that weighs its children once a month ought to have a banner, because it is doing good work, regardless of what the findings may be. Teachers, if some of you are not fortunate enough in winning a banner this month, don't become discouraged, because after all, you are working for the health of your children and not the banner. If you have done or said something during the past month that has stimulated your children to greater effort in gaining and maintaining their health, you have accomplished something of greater value than all of the banners in the world.

The following are the winners for this month:

Rooms with lowest percentage of absentees:

St. Gall's—3rd and 4th, 5th and 6th, 7th and 8th-grades.....	0%
St. Ann's—5th, 6th, 7th, 8th, 9th grades	0%

School with lowest percentage of absentees:

St. Gall's	1½%
St. Ann's	
St. Martini	3%

Rooms with lowest percentage of defective teeth:

Trinity Lutheran—8th grade.	0%
St. Wenceslaus—5th, 6th, 8th grades	0%

School with lowest percentage of defective teeth:

St. Lawrence	9%
--------------------	----

Room with lowest percentage of children under weight:

Gesu—8th grade	2%
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School with lowest percentage of children under weight:

St. John Kanty	29½%
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Special Mention:

Fifth Ave., Jones Island, St. Matthews, St. Adalberts, St. Johns Cathedral, St. Rose's, St. Stanislaus, St. Joseph's, St. Mark's, St. Cyril's, St. Josephat's.

HOW TO MAKE YOUR OWN ICE BOX.

Get a wooden box at a grocery store, such as a soap box, 15 inches in depth. Buy a covered earthenware crock, tall enough to hold a quart bottle of milk. Also get a piece of oilcloth or linoleum about a foot wide and 3 feet long. Sew the ends together to make a cylinder which will fit loosely around the crock. Place the crock inside the oilcloth cylinder, and stand them in the center of the box. Now pack sawdust or excelsior beneath and all about them to keep the heat from getting in. Complete the refrigerator by nailing a Sunday newspaper or two

other newspapers to the wooden cover of the box. It is now ready for use.

In the morning as soon as you receive the milk place it in the crock; crack 5 cents' worth of ice and place it about the milk bottle. Place the cover on the crock and the lid on the wooden box. No matter how hot the day has been, you will find some unmelted ice in the crock the next morning. Remove the crock every morning to pour off the melted. —United States Public Health Bulletin.

NO FILTH, NO FLIES.

"HELPING PEOPLE HELP THEMSELVES."

MAXINE BIEBESHEIMER, R. N., Superior of Nurses.

Some of the activities of the Public Health Nurse.

Owing to the apparently limited knowledge of the activities of the Public Health Nurse, it would seem advisable to enumerate some of the more important of these activities in order that we may all have a better grasp of what the Public Health Nurse means in any municipality, especially to those who are unable to obtain this assistance and knowledge through efforts of their own. This, one of the three articles, will endeavor to make known Community Service.

Each Public Health Nurse has a little section of the city in which she alone visits the homes where the need of health instruction and assistance is most evident. In many ways, she learns of the need of her ministrations. By birth registrations, hospital reports, and the Child Welfare Clinics she is directed to homes where the problem of caring for a new born baby is the all-absorbing topic. Child Welfare Clinics, day nursery inspection, and school medical inspection point out to her the home where the task of keeping the child in health can be made easier by her assistance and advice. The hospital extension work conducted by the Public Health Nurses provide the entry to many homes from which patients have been removed and to which they hope to return. It is the nurse's task to arrange for home conditions that will not favor a relapse. Physician's notifications of

cases of tuberculosis, and applications for free hospital treatment indicate the homes where instruction and assistance are important to protect the members of the household and others from the spread of the infection. Innumerable other means could be mentioned by which the Public Health Nurse learns where she can be of service. Her teaching has the great advantage of an object lesson, for she goes right into the home and shows how the necessary things can be done with the facilities available.

She must be not only a teacher and a nurse, but also a trained social worker. Frequently it is impossible for the people to follow her instructions because of financial stringency or some other social problem. For example, it is fruitless for her to advise that a tuberculosis patient sleep with open windows if he has insufficient bedding and no fire in the house. In such a situation she studies the social aspects of the case, before the need to the proper social agency and sees that adequate action results.

The total number of home visits made by the Public Health Nurses the first four months of this year were 16,131.

In these and many other ways the Public Health Nurses are "helping the people to help themselves" to health.

(To be continued)

A GOOD FLY IS A DEAD FLY.

FOR SCHOOL CHILDREN WHO WISH TO REACH THEIR NORMAL WEIGHT.

By JOHN P. KOEHLER, M. D., DEPUTY COMMISSIONER OF HEALTH.

Some of the reports from schools show that there are some rooms where all of the children are under normal weight. Many rooms report over 90% of the children under weight. The average number of children under weight in the parochial schools, according to May reports is about 70%. These first reports may not be as accurate as they should be, because the scales were new and in many instances not properly adjusted. Some teachers' also removed the shoes of children which was according to instructions on the weight charts, which of course would reduce the weight some. Teachers have been instructed that in the future the child be weighed in its class room clothing without removing shoes. The ultimate purpose of these scales in school is not to show how many children are below normal weight, but to stimulate children to greater effort in attaining their normal weight.

I am certain that all children want to weigh as much as the teacher says they should. Nobody likes to be called a "fatty" but neither does any child like to be called a "skinny." According to our records most of you children ought to be called "skinnies." I will tell you how you needn't be either a "fatty" or a "skinny," but a "just-right." Of course, to weigh just what the book says you ought to weigh, isn't always so easy to accomplish. Like everything else that is worth having, it

requires some effort to reach your normal weight and to keep it.

They tell me that some boys put bricks in their pockets when they are weighed in order to weigh more. That, of course, is an easy way, but it is neither an honest way nor a good way. We want you to have your normal weight, because then you will be strong enough to lick the germs, especially the germs of tuberculosis. Now a brick in your pocket may be alright to fight a dog with, but it won't help you in fighting the germs. They are so small that you cannot hit them with a brick. They also tell me that some children put on extra clothes when they are weighed. Of course, you all know that germs aren't afraid of clothes. Besides the germs may come at night when you haven't your clothes on.

My way of reaching your normal weight will at first seem hard and expensive, but after you have once reached your normal weight, you will be very glad that you did what you were told to do. In the first place, if you have any ailments of any kind have them treated. If you are absorbing pus from bad teeth every day, you are poisoning your body and cannot gain in weight until your teeth are fixed up. If you cannot see real well, have your eyes fitted with glasses, for poor eyesight will keep you thin. Bad tonsils and adenoids keep many children below weight. If your family physician advises re-

THE LITTLE HOUSE FLY IS A BIG DANGER.

moval, take a vacation for a day or two and have them taken out. After you have all defects corrected that may be the cause of your underweight then you are ready to do the following: Sleep from ten to twelve hours every day with windows open. Rest one-half hour after each meal by lying down. When you do not attend school, take a nap from 1 to 3 o'clock p. m.. Have candy and ice cream once a week. Both candy and ice cream when taken too often disturb digestion and take away the appetite for more necessary foods.

The following menu will help put on weight:

Breakfast: Milk, bread and butter, some cereal, such as oatmeal, cream of wheat, corn meal, rice or farina. Oranges or thoroughly ripe or baked

bananas. Eggs, soft boiled, poached or scrambled.

10 o'clock lunch: Milk, bread and butter.

Dinner: Vegetable soup, meat or eggs, potatoes, baked, boiled or mashed; vegetables as peas, beans, spinach, onions, string beans, squash, cauliflower, asparagus, carrots. Desserts: Rice, tapioca or bread pudding, custards, plain cookies and cake. Milk or chocolate to drink.

4 o'clock lunch: Milk, bread and butter sandwich.

Supper: Milk or chocolate, bread and butter, baked potato, stewed fruit, poached eggs on toast, ginger bread or plain cake.

Eat slowly and chew your food well.

SHAMPOOING.

FROM "PERSONAL HYGIENE."

Many persons who are favored by nature with a luxuriant growth of hair and who perhaps consider themselves immune to baldness, will grudgingly give any time to the care of the hair and consider shampooing especially distasteful. To keep the hair clean and free from dandruff, shampooing at intervals is very necessary.

There are many popular fallacies concerning questions of physiology and hygiene, and some ideas about shampooing of the scalp are no exception to the rule. Shampooing, like brushing, also removes some hairs, but by cleansing and stimulating the scalp it forms a most important means of preserving a good head of hair or aiding to restore it after a temporary falling. The

frequency of shampooing of the scalp depends on the rapidity with which dandruff accumulates, and to some extent on occupation of the individual. For some persons, washing the scalp once a month will be found sufficient to keep it in a hygienic condition. Others, and especially those whose business requires much travelling or exposure to dust and dirt, may find it necessary to wash the head once a fortnight, or even once a week. There is never any danger of shampooing the healthy scalp too frequently, notwithstanding the opposite statement so frequently made by some hairdressers, whose chief stock in trade is some "tonic" of alleged miraculous virtue. When the hair has begun to fall out permanently, due to long neglect or fol-

lowing an illness, it is well to begin shampooing the head twice or even three times a week, and to gradually lessen the intervals to once in three or four weeks.

Not only are some afraid that the shampoo will cause considerable loss of hair through the friction employed, but they fear that all the oil in the scalp will be removed and great damage done to the hair by the dryness resulting. Immediately after washing the scalp, especially if alcohol be used in addition to the soap, the scalp will certainly feel dry, but it will soon become more oily than usual due to improvement in circulation and consequent stimulation of the oil-glands. This will be the result in the majority of cases, and very few persons will suffer dryness of the scalp if they practice shampooing with sufficient frequency. Some persons actually say that after the shampoo the scalp becomes too oily. When the scalp fails to respond to the mechanical stimulus of shampooing by producing an insufficient amount of sebaceous matter, then it is well to rub into the scalp some form of grease or oil. Nothing answers the purpose better than vaseline, although some barbers prefer to use olive oil. This can be conve-

niently applied by a medicine-dropper after making numerous parts in the hair. The use of soap on the hair agitates many persons who, though employing the best soap in cleaning the skin, consider that shampooing is a dangerous procedure unless the soap used is recommended by physicians. Any good toilet soap upon the market will answer the purpose and more harm is done by refraining from the use of the shampoo than by using an inferior quality of soap on the hair.

The addition of alcohol to *shampooing liquids*, as in the tincture of green soap will greatly assist the thorough cleansing of the scalp. The addition of an egg to the shampoo is thought by many to make it more pleasant and effective. As the egg has no cleansing effect its use is largely a matter of taste. There is no more reason for its employment upon the scalp than for its use in the daily washing of the hands and face.

A very satisfactory shampoo liquid is found in the linamentum saponis mollis of the Pharmacopeia, which consists of 50 parts of soft soap, 2 parts of oil of lavender, and 33 parts of alcohol. — From "Personal Hygiene."

DAY LIGHT SAVING

The extra one hour of daylight may be fine for gardening and automobil-ing, but it is detrimental to the health of children. Children need rest and sleep as much as food. Since moving the clock ahead one hour, children must get up one hour earlier to go to school, but fail to go to bed one hour earlier evenings. It is difficult to get children to go to bed while it

is still daylight. As a result, children who used to go to bed at eight o'clock, now retire at nine. Those who used to be in bed by nine under the old time, now are up until ten.

The daylight saving plan is robbing the children of this country of an hour's sleep every day, which is very apt to be detrimental to their health. We are for health of the children first, last and all the time.

PATENT MEDICINES AND QUACKS.

Some people believe that physicians advise against the use of patent medicines from selfish motives. Patent medicine vendors also attempt to convince the public that physicians are not friendly toward patent medicines, because patent medicines take work away from the doctors. After studying the patent medicine traffic of today we have decided that the patent medicine advertisements drive much more work to the doctors than they keep away. The people last to consult a physician are the ones who know nothing about the human body or the diseases it is subject to. People who employ the physician most frequently are the ones who know just enough about human ailments to be on a continual look-out for them. They are the ones who read the patent medicine advertisements and decide that the symptoms mentioned in the advertisement just fit their case. Some of these immediately buy the patent medicine advertised, but the majority of them become frightened enough to consult a physician.

Therefore when a physician or health officer fights the patent medicine vendor, it is for the benefit of the innocent victim, who spends his money for something of little value and sometimes even injurious to his health. The reason so many individuals outside of the regular medical profession attempt to cure disease, is because they can rely upon a powerful ally to help them. This ally or partner is nature itself. It helps them all alike, whether they are physicians, Christian Scientists, chiropractors or patent medicine vendors. The only difference between

healers of disease is that some help nature more than others; some not only do not help nature but even hinder it in its work.

When a man sells you a poor suit of clothes, you soon realize that you were deceived, because the clothes vendor hasn't nature to make a good suit out of a poor suit. In fact, nature will do all it can to wear out the poor suit.

If someone sells you an automobile that won't run, you soon realize that somebody obtained your money under false pretense, because nature given sufficient amount of time, will never repair the auto.

If someone sells you a "cure all" for your ailment, you never know whether you are "stung" or not. In most cases nature, if given a little time and the mental co-operation of the patient, will do its work well. However, nature is not given credit in these cases, but many times someone or something that was really injurious to the health of the patient is given the credit.

A man selling merchandise must deliver the "goods" or soon be recognized by his patrons as a "crook."

A man claiming to sell health may in reality be selling disease and never be found out. This is the reason why the treating of disease is attempted by so many. They can be "crooked" without being discovered. The individual who knows nothing about disease or anything else will claim more wonderful cures, and many times have a larger following than the man who has put in the best years of his life studying the body and the diseases it is subject to.

Whenever you find anybody or anything proclaiming their cures from the housetop, take our advice and put them down as fakers, whether they be physicians, ministers, Christian Scientists, spiritualists, chiropractors or patent medicines.

An honest healer of disease realizes that he has nothing to boast

about, because if nature didn't do its work any better than the healers of disease, there never would be any cures to record. Therefore, when you read about the wonderful cures, claimed by patent medicine advertisements, don't forget that someone is neglecting to give nature credit for her work.

WHAT EVERY MOTHER SHOULD KNOW.

The first and noblest duty of a mother is to nurse her own child.

Know that nearly every mother can nurse her child if she will keep at it regularly for a few weeks.

Remember there is nothing so good for the baby as its mother's milk. Don't feed it anything else unless told to do so by your doctor.

Nurse regularly from five to seven times in twenty-four hours. Give the baby's stomach and yourself a chance to rest.

Know that a breast-fed baby can stand sickness, heat, and dirt much better than a bottle-fed baby.

Don't wean the baby without the doctor's consent. It is risky to wean suddenly or in summer.

Know that the food for every bottle-fed baby should be prepared exactly according to a doctor's written directions.

Know also that every bottle-fed baby, even though apparently well, should be brought to a physician at least once a month for examination, until the age of fifteen months.

If the baby does not thrive, both mother and child should be constantly under a doctor's supervision.

Have your hands and dishes clean when you prepare the baby's food.

Pacifiers are unnecessary and dangerous.

Do not put too much clothing on the baby, especially in the summer.

Keep the baby out of doors as much as possible.

Keep the windows open day and night in the summer. In the winter air the room two or three times a day.

Keep the flies out. If you have no screens, tack mosquito netting outside of the windows. These carry disease.

If the baby frequently vomits his food, it is necessary to consult a physician.

In case of diarrhoea, one of the commonest of baby complaints, give one or two teaspoonfuls of castor oil; stop all food for at least twelve to twenty-four hours; give cooled boiled water without sugar and immediately get your doctor.

• Don't blame teething or worms for your baby's illness. There probably is another reason.

Don't forget that it is easier, better and cheaper to prevent sickness than to cure it.

In hot weather the baby is thirsty, just as you are. Give him plenty of cooled, boiled water.

 FIRST AID TO THE INJURED

SUN STROKE.

Sun stroke may occur in two forms—(a) Heat Stroke, and (b) Heat Exhaustion. In sun stroke the symptoms develop usually quite suddenly. The skin is hot, dry and flushed, the puls rapid and bounding, and the respirations loud and noisy. Treatment: The patient should be brought into a cool place, all restricting clothing removed and cold water applied to the head and body. If symptoms of collapse develop, these must be treated accordingly with stimulants.

Heat Exhaustion: Here the attack may occur while the patient is in bed or at work. The condition is not necessarily due to exposure to sun heat, but may occur from exposure in an overheated room. Nausea and vomiting may precede the symptoms of collapse, during which there is a general feeling of oppression and weakness with or without unconsciousness. The skin is pale, cool and covered with cold perspiration. Treatment for these cases require the application of heat and stimulants internally. To prevent the development of either of these conditions, avoid excessive bodily fatigue, over-eating and overuse of alcoholics.

POISON IVY.

Contact of the skin with poison ivy causes in many people a very annoying inflammation of the skin. The vine is of the climbing variety, with three pointed leaves on each stem. A few hours or about a day after the skin is exposed to the poison of this plant, a red rash appears, with more or less swelling and itching. Small blisters appear, filled with serum even becoming quite large. When they burst there is considerable weeping from the surface. Later it may go on to a formation of pus. The hands and face, being the most exposed parts of the body, and the feet and ankles of those who go barefooted, are usually first affected. If the inflammation is very severe, there may be some incidental disturbance, such as fever, headache and general feeling of malaise.

Treatment: One of the best treatments for this disease is bathing with salt water, sea water being the best. Boric acid, one teaspoonful in a glass of hot water, is a good application. The large blisters should be punctured and the contents allowed to run out. Every one or two days the affected parts should be bathed with warm water, carefully dried without rubbing, and the boric acid treatment resumed.

**THE NEGLECTED CHILDREN OF TODAY ARE
THE INMATES OF OUR INSTITUTIONS
OF TOMORROW.**

MILWAUKEE HEALTH DEPARTMENT SERVICE DIRECTORY.

Sixth floor City Hall:
Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Eighth Floor:
Tuberculosis Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

SOUTH SIDE DISPENSARY, WOOLWORTH BLDG., 5TH AVE. AND MITCHELL ST.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY (MARQUETTE MEDICAL SCHOOL), 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 60.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.

Visiting Hours, Sunday, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid terine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HOW TO LIVE.

LESSON VI.



ELIMINATION.

By elimination is meant the getting rid of the waste products of digestion through bowel action.

Proper elimination is just as important for the maintenance of health as is the taking of food.

The waste products of digestion, if retained in the bowels, will decompose and produce poisons.

Pimples, headaches, backaches, mental dullness, irritability, general ill health, and in children diarrhea and convulsions, are some of the results of such poisons.

Bowel action is a normal, physiological process. Do not make elimination dependent upon cathartics or injections.

Regularity of habit, and the judicious use of fruits, vegetables, coarse or bulky foods, water, and exercise, will assure proper bowel action.

THERE SHOULD BE AT LEAST ONE BOWEL MOVEMENT DAILY.

Milwaukee Health Department.

Care of the Baby in Summer

Don't wean the baby in summer.

...Keep flies away from the baby, its food and belongings.

Keep everything away from its mouth but its food.

Keep the house, and especially the kitchen, screened, and burn all garbage at once.

Keep the baby on the shady side of the street.

Give it plenty of cool boiled water to drink.

Sponge it twice a day in addition to the bath.

The less clothing it wears the better.

Do not handle the baby much. Let it lie on the mattress in a cool place, but, preferably, keep it on the porch or in the yard or park.

If there is vomiting or diarrhoea, stop all feeding for six hours, giving it boiled water or cooled harley-water and two teaspoonfuls of castor oil and an injection. If the symptoms are not easily checked, a physician should be summoned.

Milwaukee Health Department.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

JULY-AUG. 1919.

Vol. 9, No. 7-8.

P“Public health is purchasable.
Within certain limitations a
community can determine its
own death rate.”

—Dept. of Health.
City of New York.

Bulletin of the Health Dept., JULY-AUG. 1919

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

C. L. KENNEY, M. D.,

Contagious Diseases.

RUSSELL W. CUNLIFFE,

Chemistry.

E. T. LOBEDAN, M. D.,

Child Welfare.

GEORGE E. ADAMS,

Vital Statistics.

GEORGE R. ERNST, M. D.,

Tuberculosis.

F. T. THOMSON, M. D.,

Sanitation.

F. E. CHURCH,

Bacteriology.

H. H. BRYANT, D. V. S.,

Food Hygiene.

STATE LAWS YOU OUGHT TO KNOW.

Gonorrhea and syphilis.—Under the provisions of section 1417n of the statutes any person afflicted with gonorrhea or syphilis in its infective or communicable stage is declared to be a menace to the public health. If any person so afflicted ceases to take treatment until he or she has reached the stage of the disease where it is no longer communicable, or where

the afflicted refuses to take treatment, the physician is required under penalty of a fine of not more than \$100 to report the case to the State Board of Health. The State Board of Health is then required without delay to have such person committed to a county or state institution for treatment until the stage of the disease is reached where it is no longer communicable.

Law Relating to the Sale of Drugs used in the Treatment of Venereal Diseases.

Section 2. Two new subsections are added to section 1417m of the statutes to read: (Section 1417m) 12. No druggist or other person not a physician licensed under the laws of this state shall give, sell, prescribe or recommend to any person any drugs, medicine or other substances to be used for the cure or alleviation of syphilis, gonorrheal infection or chancre, or shall compound any drugs or

medicine for said purpose from any written or printed formula or order, not intended for the purpose for whom the drugs or medicine are compounded, except on written prescription bearing date and signed by a physician licensed under the laws of this state. Any violation of this section or of subsection 13 of section 1417m shall be punished under the provisions of subsection 11 of section 1417m.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

JULY-AUG. 1919

HOW MUCH FOR HEALTH?

GEORGE C. RUHLAND, M. D., Commissioner of Health.

During the year 1918 the city of Milwaukee spent \$7.27 per capita for the building, repairing, and cleaning of streets, the collection and disposal of garbage, and the various other activities under the direction of the Department of Public Works.

The School Board had \$6.80 per capita to spend for its work.

For fire and police protection an appropriation of \$2.40 and \$2.38 per capita, respectively, was made.

For the up-keep and development of our parks, 98 cents, or nearly \$1.00, per capita was provided.

The Health Department's portion of that 1918 budget was 69 cents per capita.

From these figures it would appear that the city grades its interest in public service on the following basis:

1. Streets, alleys, garbage, sewer and light.
2. Education.
3. Fire protection.
4. Police protection.
5. Parks.
6. Health.

Our comment on this rating is not that too much has been given to other departments, but that too little—very little—has been given for health.

It is our idea that health and life are our most valuable possessions.

Sickness is expensive. According to

a survey made some time ago, it appears that there are about 40,000 people on the sick list in Milwaukee each day. The loss in dollars and cents as a result of this sickness, due to loss in wages alone, may be conservatively estimated at \$4,000,000 a year.

Death, too, is expensive. We do not know what life is worth to you. Economists say that a human life is worth at least \$5,000.

There were 6,598 deaths in Milwaukee last year. Figuring these lives lost at \$5,000 each, this represents a loss of \$32,990,000.

The loss from fire last year has been placed at \$1,126,133.74, and the loss through theft was \$119,000.00. We believe that a tax of \$2.40 and \$2.38 for each of the city's population is none too much for protection against these losses.

We are of the opinion, however, that 69 cents per capita is wholly inadequate and disproportionate for the protection possible against the millions of dollars lost yearly through preventive illness and premature death.

We are strong for education but believe that it is both foolish and wrong to allow only 9 cents for the protection of the health of the child at school, when an investment of \$6.80 is being made for the education of that child.

It is our belief that streets, parks, and all that goes into the making of a city is for the living; if for the living, why not spend a little more for that which makes life possible and worth while—health?

“What does it profit a man if he gain the whole world and lose his health?”

More money will, of course, not prevent all sickness, nor will it furnish everlasting life any more than the money the Fire Department has

will prevent all fires, or the Police Department money can stop all crime.

More money can, however, lessen disease and lengthen life. Health and life are not immutable. Within certain limits health and life can be bought. With more doctors and nurses, and more funds available, we can lessen disease, lengthen life, and save babies' lives.

Are you willing that we have for our work at least as much as the city now spends on its parks? Are you willing to spend a dollar for health?

INFANTILE PARALYSIS.

During the month of July, fifty-one cases of infantile paralysis were reported to the Health Department. For a time the daily increase in the number of cases made it appear as if the disease would grow to epidemic proportions. The Common Council was accordingly advised of the situation and requested to place at the disposal of the Health Department special funds for the purpose of fighting the spread of the disease. This was done, and a corps of special investigators was enlisted in the department service. Apparently, the closer control over cases, made possible hereby, has been helpful, and since the first of August the new cases reported have averaged only one per day.

The assistance of Marquette University Medical School, as well as of the staff of Columbia Hospital, has also been secured for the purpose of doing special research work, which, it is hoped, may lead to the discovery of methods of earlier diagnosis, and perhaps, also, more specific treatment.

The alarm which the situation occasioned among the public, is not wholly justified, since, after all, comparatively few cases have developed so far. The public is entitled to know, and to take comfort from the fact that, fortunately, the majority of us are immune to the disease. This knowledge, on the other hand, should not lead to carelessness. As the name given to the disease indicates, the greatest number of its victims is found among small children. Common sense and justice, therefore, demand that we protect these defenseless ones as best we know how.

Since at the present time it is still very difficult to make a positive diagnosis early, as many of the initial symptoms are similar to those occurring in other acute illnesses of children, it is important that a physician be called in early whenever indisposition or illness develops in a child.

The disease being of a contagious nature, children, especially those under eight years of age, should be

kept away from picnics or other places where large numbers of children are likely to come together. Adults, too, may become carriers of the disease, that is, they may harbor the germs of the disease though they themselves may develop none of the

symptoms of the disease. Contact with every case of acute illness is, therefore, to be strictly avoided.

The public can further assist in the control of this and of other acute contagious disease by promptly reporting every case of acute illness to the Health Department.

ROOM FOR IMPROVEMENT.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

We have all come in contact with individuals and organizations who consider themselves beyond the stage of improvement. They are so satisfied with themselves that they never think of looking for any weak spots that might be strengthened or any short-comings that might be improved. Such an attitude of mental satisfaction may be overlooked where only dollars and cents are concerned, but never where it concerns human lives.

In looking over our statistics for the year 1918, we find that out of 430 people who had diphtheria, 51 died, which is about a 12% death rate. The death rate per cases reported in 1918 for other contagious diseases is as follows:

Measles, 1%; influenza, 2%; whooping cough, 3%; scarlet fever, 5%.

This shows that although we have almost an accurate means of making an early diagnosis, and almost a specific treatment for diphtheria, yet, relatively more children are dying from this disease than from diseases concerning the cause and treatment of which we know very little.

From this it must not be inferred that the less doctors know about a disease the lower its mortality rate. Children die from diphtheria because

some one neglected to give them the advantage of an early diagnosis and early anti-toxin treatment. In the majority of cases it is not the fault of the physicians, but of the parents who consider it unnecessary to call a doctor when the child is ill until it is too late to administer diphtheria anti-toxin successfully.

Very few if any out of these 51 cases would have died if given anti-toxin when they first showed signs of illness.

The Health Department furnishes everything necessary to make an early diagnosis, as well as free diphtheria anti-toxin. Where people are unable to employ a physician to see a sick child, the Health Department is ready to furnish a nurse or a doctor.

Some parents are willing to jeopardize the lives of their children to escape quarantine, and therefore many times try home remedies rather than call a physician, who would report the case to the Health Department.

Twenty-eight of the 51 cases that died of diphtheria were children under 5 years of age; 49 out of the 51 were under 15 years of age.

We have stringent laws to protect animals, but a helpless child with diphtheria may be refused proper

treatment by its parents and public opinion seems to acquiesce.

Children must have a square deal! An inquest should be held over every child dying from diphtheria because in about eight out of ten cases, some one was criminally negligent. A law should be passed compelling parents

to either employ a physician when a child under ten years is ill or report the case to the Health Department.

The Child Hygiene Bureau of the Milwaukee Health Department is getting ready to fight anybody and everything that opposes a square deal for children. Look out for us!

HAY FEVER.

The month of August is the time when the sufferers from hay fever usually experience their annual attack from the illness known as hay fever or autumnal catarrh. The attack may last from a few days to several weeks, or until the advent of cold weather and frost.

The symptoms usually are variable, ranging in degree from only a slight indisposition to extreme prostration.

The exciting cause for the attack likewise appears to be of a variable nature, the pollen of flowers, dust, fumes, and odors precipitating the attack in some, while in yet others the attacks develop apparently entirely without any such exciting agents.

These latter cases usually develop on a markedly neurotic background.

Naturally the treatment for hay fever must vary according to the agents apparently responsible, no one line of treatment being equally successful in all cases.

Considerable relief in most cases is found along the seashore and in the high altitudes of mountains. Also, the lake region of northern Wisconsin has gained for itself an enviable reputation as a refuge for hay fever sufferers.

In some other cases the removal of growths within the nose proves beneficial and curative. Local treatment, however, should only be undertaken under the immediate supervision of a competent specialist.

WHAT EVERY MOTHER OUGHT TO KNOW.

Keep all food clean and cold.

Never without a doctor's orders feed a well "bottle" baby oftener than seven times in twenty-four hours—better six.

If the baby cries a great deal, a physician should be consulted.

If the baby cries at other than feeding time, you may give cooled boiled water.

Use a clean boiled bottle for each feeding.

Use a clean boiled nipple for each feeding.

Always throw out the milk that is left in the bottle after feeding.

Always keep the milk on ice until it is ready to use.

Hot, close and dirty rooms kill babies quickly. Therefore, keep the house cool, well ventilated and clean.

Bathe the baby every day and in hot weather sponge him off two or three times more.

"HELPING PEOPLE TO HELP THEMSELVES."

MAXINE BIEBESHEIMER, R. N ,

Some of the activities of the Public Health Nurse.

(Continued.)

PRE-NATAL WORK.

That instruction in the hygiene of the Pre-natal state is urgently required, is demonstrated by the fact that about 30 per cent of infant deaths occur in the first month of life and most of these are due to pre-natal or natal causes. The Public Health Nurses visit such cases where they believe they are needed and give instruction and advice in reference to bodily care, proper food, dress and housing, and the many steps that should be taken in preparation for the safe arrival of the expected baby. The importance of early and systematic examination is vigorously encouraged.

INFANT AND CHILD WELFARE VISITING.

Each Public Health Nurse is notified of every birth reported from her district. If she considers it advisable, she revisits to give friendly advice and instruction in the care of the baby, and to help clear up the social problems that may jeopardize the little one's chances. The importance of breast feeding is one of her most persistent messages. If breast feeding proves to be impossible, the proper preparation and care of the baby's food is her great concern. Suitable clothing, bathing, ventilation, etc., are also to be considered. No less than 6,390 Infant Welfare visits were made during the first four months of this year.

CHILD WELFARE CLINICS.

The nurse usually recommends that the baby be taken to the nearest Child Welfare Clinic for periodical medical examination. These consultations are conducted in five Neighborhood Centres by specially trained physicians assisted by the Public Health Nurses. The infants are systematically weighed and measured and careful record of their progress is kept. An expert medical examination is made and advice is given in the care and feeding of the child. These clinics are not limited to infants but are available for all children below school age. If remediable physical defects are discovered or the child is found to be suffering from disease, it is referred to the family physician for treatment, or if this is impossible, to the Hospital for Sick Children. In this way not only is the infant and child mortality materially reduced, but also many defects are corrected before they become irreparable and before the child enters school. During the first four months of this year, 99 such clinics were held.

SUPERVISION OF LICENSED BABY BOARDING HOMES.

The Public Health Nurses inspect and supervise from 50 to 100 licensed homes in which babies may be boarded. Detailed records are kept of each home and of each baby admitted and discharged. A social investigation is also made by every child to be boarded, to ascertain the family situation which necessitates this measure.

(To be continued.)

"HEALTH FIRST IN THE SCHOOLS."

We have at last discovered that health, like happiness, is to a large extent a matter of habit, and that it can be taught. To the teachers who are ambitious for professional recognition, as well as to those who are desirous of being vitally helpful to the young lives committed to their charge, the stimulation of health activities in school offers a great opportunity. Our stereotyped aims and methods in the teaching of hygiene have to a large extent been discarded. The new aims are very definite, but our methods of attaining these aims are largely undeveloped. In health work in the schools every teacher must be a pioneer. There is a great responsibility and at the same time a great opportunity.

The successful teachers of health can be no routinists. They must be at once resourceful and enthusiastic, possessing those qualities of mind and spirit which enable them to be leaders. Since questions of health are as broad as life itself, they can not hope to do their best work while sitting within the four walls of the classroom. They must co-operate with all of the other persons and agencies in the community whose influence in any way affects the health of school children. They must learn to work with parents, with family physicians, and local health agencies, and to utilize the services of newspaper men, of ministers and churches, women's clubs, and other civic organizations.

What, then, are the aims and guiding principles of this new education in health?

The time has passed when a glib recitation of the names of the bones of the body, of the stages of digestion, can be regarded as a test of successful teaching. The end to be aimed at is not *information*, but *action*; not simply *knowledge* of what things are desirable, but rather the *habitual practice* of the rules of healthy living.

A second principle which must underlie all successful health education is that it shall be positive rather than negative. We must learn to think of health in terms of strength and beauty and joy, rather than of weakness and disease. We must imbue the attainment of health with the spirit of a glorious game, following the laws of health as we would obey the rules of the game. "Thou shalt!" must take precedence of "Thou shalt not!" We must not say, "Don't forget to brush your teeth or they will decay and you will have a bad digestion." Rather, we must say, "Brush your teeth regularly so that you may enjoy the feeling of a fresh, clean mouth, and have a sweet breath, and a fine, shining set of strong teeth!"

Next, health must not be taught didactically, but by personal example and object lesson.

Frequently it must be taught indirectly rather than directly. The child has no interest in health for health's sake, and it is not unnatural that this should be so. But every girl desires to be beautiful, and every boy desires to be strong and athletic, and the wise teacher will build on these natural interests of the children, and

Public Health is Purchasable!

inspire them to do the things which will result in physical beauty and strength.

The teaching of health, moreover, can not be confined to any one lesson period, but can be introduced into almost every study in the curriculum. It is often chiefly a matter of emphasis rather than formal instruction. The consideration of questions of diet, of ventilation, of the spread of transmissible disease, are all important, but it may be desirable to treat of them in connection with work in domestic science, in physics, or in nature study. History, civics, English, and geography all offer opportunities for the inculcation of health lessons. The important thing is that teachers themselves shall have acquired the *hygienic point of view*, so that they will be able to see and make use of these opportunities.

Finally, a definite amount of time should be allowed every school day from the kindergarten upward for health inspections, the discussion of health problems, and for other health activities. In the lower grades this time should be devoted wholly to the promotion of health habits. It is the *what* rather than the *why* which should be impressed on the younger children. With the older children, the reasons for health rules take more prominence, and in the upper grades the habits which have been formed in the lower grades should be reinforced

by accurate scientific knowledge. The material of instruction in hygiene should be taken from life; and textbook instruction, if any, should be merely incidental. In the upper grades the pupils should be interested in public health movements, and much information of personal value can be thus indirectly conveyed. For instance, in studying the phases of the campaign against tuberculosis, the pupil learns many facts about the disease and its prevention, with the advantage that his attention is directed outward and is not morbidly turned upon himself.

We have been too much accustomed to regard health as something arbitrarily given or withheld from us by Providence—something over which we ourselves have no control. We now know that in order to obtain health we must earn it by obeying the laws of health. The most fundamental of these laws relate to cleanliness, within and without, proper diet, exercise, rest, and fresh air. Obedience to these laws must become almost automatic in the child's life, so that he will be uncomfortable unless, for instance, his hands are clean, his bowels thoroughly evacuated, his food simple and wholesome—so that he will be uncomfortable in foul air, and will automatically seek fresh air and enjoy playing and sleeping in it.—Child Health Organization, Bureau of Education, Washington, D. C.

THE NEED OF MENTAL RECREATION.

By J. W. COURTNEY, M.D.

With a terrible emotional incubus fastened upon a brain which is being forced to work in a single rut, as it is in the case of inventors, specu-

lators, and promoters of schemes, it is easy to see why it soon comes to the end of its forces; and the hygienic hint therein contained is

equally obvious. America is justly proud of her banker poet, who has found abundant time to enrich the world of letters while still enaged in a pursuit which often taxes the mental and emotional stability of its followers to its utmost. Why should we not also produce literature from the stock exchange or art connoisseurs from among the ranks of other callings, the slavish pursuit of which is fraught with such disastrous results to the nervous system? These are only a few ways that brain-rest may be obtained, but they are sufficient to indicate what brain-rest means. It is a very great mistake to suppose that cerebral activity can ever be brought to a stand-still. The brain is an organ which never ceases its activity, not even during sleep; of this we are often painfully made aware when we are suddenly awakened into the shivering consciousness of having experienced a bad dream. When we speak, therefore, of measures other than sleep that may be adopted to obtain rest for the brain, we merely mean those which aim at diverting its activity into channels that will afford a pleasant or soothing reaction upon consciousness.

The truth of this fact is strongly borne in upon us by the numberless failures of brainworkers to obtain needed rest through efforts which entirely neglect to give it its due weight. It is certainly a great mistake to try to escape the Nemesis of an over-worked and harassed brain by a feverish tour of the continent, or by a few weeks' unwilling sojourn within the deadly dull confines of a country village. The familiar and much-quoted lines: "They change

their skies but not themselves, That cross the seas", are extremely pertinent to the case in point, and should be memorized by all who are striving to work out the mental and nervous salvation of the brain-worker.

It is clearly impossible for the average stockbroker or scheme-promoter to become a shining light in the world of art or letters. That fact is fully appreciated in the proposition set forth. There is nothing lost, however, if such a person's efforts are not crowned with success, whereas the gain from the healthful mental gymnastics involved is often incalculable.

Thus far two general outlets for high-pressure cerebration have been mentioned; there are many others, and one of the most valuable is the cultivation of fads. Fads may be said to constitute a perfect mental antitoxin for the poison generated by cerebral over-activity. It is not necessary that they should be at all expensive or involve a great amount of time. The brain-worker whose purse will permit of no greater drain than that which is involved in the fad of stamp-collecting on a small scale, has just as great a chance for nervous salvation as the person whose bank account warrants the acquisition of a museum of art-treasures, and the writer feels confident that he has seen complete mental prostration averted in one instance by an overwrought young woman turning her attention to the study of the different weaves of oriental rugs. Among other fads which are helpful may be mentioned the collection of bookplates, rare books (which are often not expensive, though pleasantly elusive), old china and furniture, and old prints. This list might be

prolonged indefinitely, but it will suffice to say that many not here enumerated will be suggested by a study of the circumstances surrounding the individual case.

To all this will undoubtedly be objected the plea of lack of time. The

answer to arguments formed on such a flimsy basis is, that all time which is spent in preparing one's self as a candidate for a sanitarium, or worse still, for a lunatic asylum, is like the proverbial edged tool in the hands of children and fools.

THE GARBAGE QUESTION.

GEORGE C. RUHLAND, M. D., Commissioner of Health.

The summer has developed the usual complaints with regard to garbage collection. The Health Department is largely made the recipient for these complaints. For twelve years past now, the Health Department has had nothing to do with the collection of garbage; the service having been transferred to the Department of Public Works. This transferral of service to the Department of Public Works has been perfectly proper, because garbage collection is in no way a Health Department responsibility.

The Health Department is, none the less, very much interested in the problem of garbage collection and, therefore, ventures to offer some suggestions that may be helpful in solving the problem.

We are of the opinion that the quickest and surest way to remedy the situation would be to grant the garbage collection department the amount of money which it believes necessary to modernize and carry out this service competently.

We believe that the garbage collection department best understands where the trouble lies and, therefore, also is best qualified to apply the remedy.

It seems to us highly unfair to deny a department adequate appropriation to carry on its work, and then blame such a department for not doing better service.

Our own notion with regard to modernization of the garbage collection service would include the building of a new disposal plant.

As the city grows in size, the hauls to the present garbage disposal plant—the location of which we believe to be an unfortunate one—will of necessity be even longer and longer. The zoning of the city, and the removal of garbage to plants more conveniently located seems, therefore, a necessary feature in dealing with this problem.

In the next place, we would suggest the replacement of the small one-horse wagon by motor-driven trucks, capable of carrying larger loads and making longer hauls in quicker time.

The argument that horse-drawn vehicles must be retained because it would be impossible to operate motor trucks in winter seems to us wholly unwarranted. Even if a heavy snow-fall should temporarily make garbage collection impossible, that difficulty would be greatly offset by the fact that the cold of winter would prevent the garbage from becoming a nuisance.

Besides, much of the garbage can be burned by the householder in winter. It is in summer that the collection of garbage is essentially needed. Motor trucks will have no difficulty to operate successfully at that time.

Finally, we also believe that it would help if garbage cans were provided as part of the garbage collection service, and if these receptacles were placed in covered cement wells,

as is the practice in some cities. This latter feature would prevent cats and dogs from getting at garbage and scattering it about.

We realize that this is a rather large program and one that can hardly be carried out within a single year, yet we feel that improvement, and the ultimate solution of the garbage collection problem, can be reached by carrying out such a program.

PATENT MEDICINES

JOHN P. KOEHLER, M. D., Deputy Commissioner.

At the present writing our daily newspapers do not contain so many patent medicine advertisements. This no doubt is due to the fact that the publicity man for patent medicines realizes that people don't have so many aches and pains during the warm months and are therefore not looking for something to cure headache, backache, stomach-ache or toothache.

Perhaps also it doesn't pay to advertise too much in summer, because most of the suckers have gone to the lakes where the other fish are.

However, our old friend Tanlac is still advertising. The head-line is as follows: "Spent \$500.00 in Seeking Health." It doesn't explain in detail how this \$500.00 was spent. Perhaps a big part of it went for other patent medicines. Perhaps the chiropractors got a little of the \$500.00. Maybe even a Christian Science healer wasn't afraid of this woman's money. No doubt a substantial amount of this \$500.00 also went to doctors of medicine, but we venture to say that not any one doctor got very much of it. After reading the testimonial we feel

justified in stating that this woman is like thousands of other patients who run from one doctor to the other, seeking health and then blame the medical profession for not finding it. If you are sick and wish to get well don't see many doctors, but see one conscientious doctor many times.

According to the testimonial, this patient had kidney trouble, headaches and stomach trouble, which all vanished after taking three bottles of Tanlac. If this woman really had diseased kidneys before taking Tanlac, we are certain that if the woman is still alive, her kidneys are worse than ever, for Tanlac contains alcohol, and alcohol is poison to the kidneys.

Mrs. T. further states that she has been cured of her stomach trouble and has gained ten pounds in weight. We know of a Fred Wick who also claimed that he gained ten pounds in weight and was cured of stomach trouble by taking Tanlac. This Fred Wick, however, died from cancer of the stomach two days before his testimonial appeared. Who knows how Mrs. T.'s stomach is at the present time?

 FIRST AID TO THE INJURED

BURNS AND SCALDS.

As soon as the injury is received plunge the part in cold water, preferably ice water. This checks the action of the heat and instantly stops the pain. If boiling water or soup is spilled over the leg or foot do not wait to remove the clothing but thrust the entire part into a bucket of water or pour cold water freely over it. Keep submerged in cold water, or covered with a cold-water dressing, which is frequently renewed for 20 minutes to a half hour, depending upon the severity of the injury. Then apply a permanent dressing. There are many ways of treating burns, all of which have their advocates.

A very satisfactory dressing is plain vaseline. This is spread with a knife on clean pieces of old muslin, gauze, or similar material, just as butter is spread on bread. The prepared cloth is then cut into strips and the strips laid on the burns "buttered" side down. The plan of using several or more small strips is better than applying one large piece, as the smaller dressings come off much more easily when the burn is re-dressed. A thin layer of cotton may be applied over the muslin or gauze to protect the part from injury and the entire dressing held in place by a suitable bandage. *Never, under any circumstances, apply cotton directly to a burn.* A good deal of fluid exudes from a burn,

and this fluid will harden in the cotton and cement it firmly to the surface of the wound so that it can not be removed without great pain and interference with the healing process.

Blisters may be opened by a needle, the point of which has been passed through a flame. The dressings should be removed at the end of 24 hours and fresh ones applied. Every household should keep on hand a large jar of vaseline for the purpose of dressing burns. Boric acid ointment makes a most excellent dressing for injuries of this sort. A substitute is made by thoroughly mixing one part of boric acid with ten parts of petroleum molle or vaseline. In the absence of vaseline use sweet oil, olive oil, castor oil, or some of the many preparations of liquid petrolatum now so extensively advertised for the cure of constipation. In emergencies automobile grease or cylinder oil may be used, but always put the medicine on the dressing and then lay that on the wound rather than to attempt to spread the medicine on the surface of the burn itself. Carbolyzed vaseline should never be used on a burn, as the carbolic acid, if of any considerable strength, is apt to cause extensive sloughing of the part and deep ulcers, which are extremely difficult to heal. In all cases of severe burns call a doctor.—U. S. Public Health Service.

**Sore eyes in new-born babies should
receive prompt attention.**

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.**Sixth floor City Hall:**

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Eighth Floor:

Tuberculosis Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.**TUBERCULOSIS****EIGHTH FLOOR, CITY HALL:**

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

SOUTH SIDE DISPENSARY, WOOLWORTH BLDG., 5TH AVE. AND MITCHELL ST.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY (MARQUETTE MEDICAL SCHOOL), 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.**SOUTH VIEW HOSPITAL.**

Telephone, Orchard 60.
Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.
Visiting Hours, 3 to 5 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.
Visiting Hours, Sunday, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.
Emergency Hospital.
South Side Contagious Disease Hospital.
Union Pharmacy, 1120 Walnut St.
Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HOW TO LIVE.

LESSON VII.



P O S T U R E .

The natural posture for humans is an erect one; head up; chin in, chest out, abdomen retracted.

This position will permit the best functioning of the organs and provide proper circulation.

Don't crowd chest or abdomen; don't slouch. A slouching position—chest sunken, abdomen protruding—hampers the circulation and interferes with the proper function of the organs in chest and abdomen.

Headaches, backaches, digestive trouble, and general poor health, frequently result from faulty posture.

A slouchy posture may not always mean physical and mental deterioration; but it certainly will lead to it, if not corrected. Don't be a slouch.

STAND ERECT. WALK ERECT. SIT ERECT.

Milwaukee Health Department.

How Much for Health?

Per Capita Cost of Health Department
Work as compared with other
city departments

BUDGET FOR 1918

Department of Public Works.....	\$7.27
School Board	6.80
Fire Department	2.40
Police Department	2.38
Continuation School	1.21
Park Board	.98
HEALTH DEPARTMENT	.69

Milwaukee Health Department.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

SEPTEMBER 1919.

Vol. 9, No. 9.

“Happiness lies, first
of all, in Health”

George William Curtis.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

C. L. KENNEY, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. E. CHURCH,
Bacteriology.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

F. T. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

ORDINANCE YOU OUGHT TO KNOW.

Drugs not to be thrown on streets.

Section 903. It is hereby made unlawful for any person, firm or corporation, or for any officer, member, agent, servant or employe of any firm or corporation to leave, place, throw, deposit or distribute any sample packages of any patent or proprietary medicine, or any preparation, pill, tablet or drug, or compound drug whatsoever, in or upon any lot, doorstep, private dwelling house, public building, store or office building, or to deliver to any child under the age of fifteen years, when not accompanied by an adult, any patent or proprietary medicine, or any preparation, pill, tablet or drug, or compounded drug whatsoever, or to place, throw, deposit or distribute any sample packages of any patent or proprietary medicine, or any preparation, pill,

tablet or drug, or compound drug whatsoever, in or upon any sidewalk, highway or other public place or park within the limits of the city of Milwaukee.

Penalty.

Section 904. Every person, firm or corporation, and every officer, member, agent, or servant of any firm or corporation who shall violate any of the provisions of the foregoing section shall, on conviction thereof, be punished by a fine of not less than one dollar nor more than fifty dollars, together with the costs of the action, and in default of payment thereof shall be imprisoned in the house of correction of Milwaukee county for not less than thirty days nor more than ninety days in the discretion of the court.

**With the high cost of living do not forget
the high cost of dying.**

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

SEPTEMBER 1919

WILL THE FLU RETURN?

By George C. Ruhland, M.D., Commissioner of Health.

It is just about a year ago that the pandemic of influenza-pneumonia in its world-encircling course burst in full fury upon the cities of the North American continent.

The epidemic was the most deadly that ever came to this country. Within three months, during which the epidemic reached its height, more than half a million people died as its victims in the United States alone.

That means a mortality of more than six times the number of dead lost by the United States during the eighteen months of our participation in the great world war.

Milwaukee, although vastly more favored than any other city in her class, unfortunately lost 1,108 of her citizens, and the epidemic stands as an unequalled experience in the history of the city.

It is, under the circumstances, not unnatural that with the anniversary of the epidemic and its bitter memories, the question should present itself—will the flu return?

We understand that there are those who, basing their experience on the last pandemic of influenza some thirty years ago, answer this question in the affirmative, and tell us that worst is yet to come.

We do not feel that such a categorical answer is at all justified. Whether or not the epidemic will return, and if it does, whether it will

be severe or less so, seems to us entirely an idle speculation in which one man's guess is practically as good as another's.

If there is anything to be gained out of the experience of the epidemic of thirty years ago, it is this fact—and it is a comforting one—that that epidemic left a widespread immunity, since the records of last year's epidemic show that the disease attacked particularly those under thirty years of age.

In view of the wide spread of last year's epidemic, it is reasonable to conclude that the public has been largely immunized and that, therefore, the epidemic, should it return, will be of a greatly lessened severity. This opinion should not be taken as an excuse for indifference or carelessness; on the contrary, our advice is: be prepared.

With this in view the department urges upon the public to carry out again those measures which in last year's epidemic have been found of value.

These measures are—first, to keep yourself in as good health as possible. That means, eat enough, but do not overeat; get plenty of fresh air; sleep with bed room windows open, practice deep breathing; dress rationally, and keep the feet dry; sleep at least eight hours out of twenty-four; avoid excesses; and attend to proper elimination.

In the second place, avoid contact with all known cases of acute contagious disease; observe personal cleanliness; and avoid the unnecessary and much overdone handshake; use your handkerchief when coughing and sneezing, and insist that others do so likewise.

Thirdly, give prompt attention to oncoming illness. Do not try to fight off a cold by keeping about. Go to bed promptly and call a physician.

In addition thereto, report promptly all cases of influenza to the Health Department as required by state law.

A word might here also be said with regard to the use of pneumonia vaccine as a preventative. The fuller reports of the government with regard to the protective use of pneumonia vaccine are now at hand, and from these it appears that the use of this vaccine is well worth while. The department, therefore, urges its use as a preventive measure.

HEALTH DEPARTMENT SUBSTATIONS.

At the present time the activities of the Health Department, outside of the hospital service, are all directed from the central offices of the department in the City Hall. This arrangement, as might be expected, is a considerable handicap to the service, and does not permit the department to do as efficient work for the public as it should and might with the number of employes engaged.

The disadvantage is particularly apparent in the nursing service. At the present time the nurses of the department are obliged to travel long distances across town to report to the one down town office of the Health Department, respectively, they are obliged to take children who require dental work or other special examinations to the down town office. Almost 25 per cent of the time of the nurses is lost merely in needless travel on this account.

This difficulty could be overcome if the department had substations in various parts of the city. There should be at least five substations; two to be provided at once, one to be

located on the south side and one on the northwest side. These stations should include all the clinical and dispensary facilities which the department now offers, and should also serve as a place from which the nurses in a given district would operate. Not only would this represent a great economy by cutting down on the time lost by the nurses as well as the school children, but it would also greatly strengthen the efficiency of the department by bringing the service to where the public could more readily make use of it.

Milwaukee, as a city of over half a million inhabitants, has grown too large for a single Health Department station. The Health Department needs substations just as much as the Fire and Police Departments must have stations in various parts of the city, or the public schools must be distributed throughout the city. The location of such substations, which preferably should be located in buildings owned by the city, might well be included in the considerations of the City Planning Commission.

How to Reduce the High Cost of Living.

By John P. Koehler, M.D., Deputy Commissioner of Health.

One great fault of humanity is to blame someone else for all existing evils and to claim credit for everything that has any merit.

At the present time, everybody is blaming everybody else for the high cost of living. If the high cost of living could be traced to one individual or to a class of individuals, it would be an easy matter to remove the cause, but since the very people who complain the most of the high cost of living are responsible for the same, it becomes a very complex situation. We believe that the consumer is as much responsible for the high cost of living as is the producer. The price of anything can be reduced by either increasing the supply or decreasing the demand. At the present time, it is rather difficult to increase the supply owing to the shortage of labor, so that if the consumer wishes relief, it is up to him to reduce his demand.

The standards of living among the poorer people have so been raised, that the girl with a seven dollar a week income dresses like her wealthier sister who has an unlimited income. The young man with a hundred a month income dresses like a millionaire and feels that a Ford is no longer good enough for him. Poor parents are not going to allow their wealthier neighbor's children to do things that their own children can not. As a result, the movies and ice cream parlors are patronized regularly. Bicycles, motorcycles, phonographs, pianos, etc., are bought at ten down and ten a month.

When we were young, we were happy and healthy. We had ice cream on the Fourth of July and good old mixed candy at Christmas. Mother patched older brother's trousers at four different places—two in the front and two in the rear—which we wore to school. The shoes we wore in winter weren't always our size, but we got even by not wearing any in summer. In those days, we didn't know what malnutrition was and yet if children of today had to eat what we did, charitable organizations would be called upon for assistance. We believe in wholesome food, warm clothing in winter and little clothing in summer, fresh air, eight hour working day, sanitary homes, recreation and sufficient wages to more than pay for these necessities, but we do not believe in people with limited funds trying to keep up the pace set by people with means. The poor can never catch up with the rich, because the latter will increase his pace rather than to be caught, and the faster the pace the more expensive the race. Let us decrease our demands and see what happens. There is a shortage of sugar. Why not have candy-less days, or candy-less weeks or even candy-less months? Ice cream-less days or weeks would keep down the price of milk and cream. There is a shortage of ice. Ice in most homes is a luxury and not a necessity. Use ice only to save food and lives and not to tickle your palate. Let's have more meat-less days and veal-less years. Some scientists blame the increase of cancer to the increased meat

consumption. If we want more meat and more milk, we must stop eating up the calves. If we want clothing to become cheaper, we must ignore style and go to our attics for our Fall and

Winter suits instead of to the tailor or clothing store. Let us use more common sense in our living and if that won't make everything more common.

WHAT YOU SHOULD KNOW ABOUT CANCER.

From present knowledge it appears that cancer is on the increase.

Within the last ten years cancer has increased by nearly four per cent. in the city of Milwaukee.

Last year 352 persons died in Milwaukee from cancer.

During the Great War the United States lost about 80,000 soldiers. During the same two years 180,000 people died of cancer in this country. One out of every ten persons over forty dies of cancer.

Many of these deaths are preventable, since cancer is frequently curable, if recognized and properly treated in its early stages.

Cancer begins as a small local growth which can often be entirely removed by competent surgical treatment, or, in certain external forms, by using radium, x-ray or other methods.

Cancer is not a constitutional or "blood" disease; there should be no thought of disgrace or of "hereditary taint" about it.

Cancer is not a communicable disease. It is not possible to "catch" cancer from one who has it.

Cancer is not inherited. It is not certain even that a tendency to the disease is inherited. Cancer is so frequent that simply by the law of chance there may be many cases in some families, and this gives rise to

much needless worry about inheriting the disease.

The beginning of cancer is usually painless; for this reason its insidious onset is frequently overlooked, and is too easily neglected. Other danger signals must be recognized and competent medical advice obtained at once.

Every persisting lump in the breast is a warning sign. All such lumps are by no means cancer, but even innocent tumors of the breast may turn into cancer if neglected.

In women continued unusual discharge or bleeding requires the immediate advice of a competent doctor. The normal change of life is not accompanied by increased flowing, which is always suspicious. Do not expect the doctor to tell you what the matter is without making a careful physical examination.

Any sore that does not heal, particularly about the mouth, lips or tongue, is a danger signal. Picking and irritating such sores, cracks, ulcerations, etc., or treating these skin conditions by home remedies, pastes, poultices, caustics, etc., is playing with fire. Warty growths, moles, or other birthmarks, especially if the subject to constant irritation, should be attended to immediately if they change in color or appearance, or start to grow. Avoidance of chronic irritation and removal of just such

seemingly insignificant danger spots may prevent cancer.

Persistent indigestion in middle life, with loss of weight and change of color, or with pain, vomiting, or diarrhoea, call for thorough and competent medical advice as to the possibility of internal cancer.

Radium is a useful and promising means of treatment for some kinds of cancer, in the hands of a few skillful surgeons and hospitals possessing

sufficient quantity of this rare and very expensive substance; it must not be thought of as a cure-all for every form of cancer. No medicine will cure cancer. Doctors and institutes which advertise "cures without the knife" play upon the patient's fear of operation in a way that leads too often to the loss of precious time, and fatal delay in seeking competent treatment. Go first to your family physician.

PATENT MEDICINES

We were called in the other day to examine and treat a man who complained of stomach trouble. We were scarcely seated near the bed of the patient when her husband volunteered the following testimonial:

"My wife has had trouble with her stomach all summer. She has been taking all sorts of stuff. A fellow I am working with told me to get her a bottle of Tanlac, which I did, and since then she is getting worse. That stuff isn't worth a d——."

For every testimonial secured by the patent medicine man proclaiming his stuff as marvelous, we can get many saying that "it isn't worth a d——." According to the advertisements of some patent medicines, thousands of bottles are sold daily, so that it is reasonable to assume that a few out of these thousands can be found who will recommend a bottle to others. Those who feel like saying, "that stuff isn't worth a d——," are seldom heard from.

When people decide to buy an automobile, they give very little attention to advertisements of automobiles, but consult their friends and automobile experts for advice. When they decide to buy a home, they do not buy because it is advertised as the "most modern home" in the city, but they only buy after having examined the house from basement to attic and are convinced that it is what they want and need. There are very few things that people buy without knowing what they are getting. They are usually from Missouri and want to be shown. When it comes to buying health, however, people do not always investigate before buying. Instead of getting the advice of experts, they follow the advice of patent medicine advertisements.

Instead of getting your advice from strangers through newspaper advertisements, we would advise you to seek the advice of your family physician when in need of better health.

It costs the taxpayer \$200 every time the fire department is called out to save a building, but what city is willing to spend 200 cents for a call that might save a life?

"HELPING PEOPLE TO HELP THEMSELVES."

Some of the Activities of the Public Health Nurse.

MAXINE BIEBESHEIMER, R. N.,

SCHOOL SERVICE.

School Medical Service is provided in 65 Parochial Schools, the total number of pupils being about 26,000. In connection with school children, the department has three main functions; to prevent epidemics, to discover remediable physical defects and to have them treated and to develop knowledge and habits of personal hygiene.

Because a doctor costs about twice as much as a nurse, it is the policy of the department to have the Public Health Nurse do as much as she can of this work, thus making it possible for the physician to spend all of his time on doing those things that demand his special medical skill and standing.

To prevent epidemics, the essential thing is to remove from the class room those children that have or are developing a communicable disease. Periodical class room inspections are made, and the teachers send to the nurse all pupils that they suspect of being ill. Moreover, all children who are absent from school for two or more days are examined by the doctor or nurse before they are permitted to re-enter their classes. If, upon examination, the doctor or nurse suspects a communicable disease, they immediately send the child home with instructions to the parent to keep him isolated until a Public Health Nurse or Physician can visit and decide whether or not the suspicions were justified.

In connection with the dental inspection of school children the nurses perform a somewhat similar function. During the first four months of this year, 1919, the number of children given examinations was over 3,400. In addition, the nurse makes all appointments for treatment of pupil's teeth in the dental clinic, obtaining parent's written consent, etc. She is responsible for getting the proper number of children to the clinic each day for the dentist to operate upon. The same is true in the eye, ear, nose, and throat work.

In the health education of the children the lion's share of the work falls to the nurse. Everything that she does in school is a means for pointing a lesson to the child. Besides the opportunity for class room health talks are being used with increasing success.

Girl's Health Leagues, formerly known as "Little Mothers Classes," are being conducted in five centers. The course consists of eleven lessons and is given to girls from Junior Fourth Classes, selected by the school principals. Demonstrations are given of those features of infant care which are of interest to girls of twelve years of age. The interest has been such that the enrollment has increased since the beginning of the course. The Board of Education has arranged the nurses to be given instruction in the Principles of Teaching in preparation for the course.

Emergency work in the schools

usually falls upon the nurse. Simple dressings are quite within her scope. The handling of pediculosis i. e. lice, which is surprisingly prevalent, is also, entirely in her hands.

TUBERCULOSIS WORK.

The chief problem in tuberculosis work is to teach the patient and the family how to live in such a way as to improve their own chances and not to be a menace to those about them. The Public Health Nurses visit cases of tuberculosis with the permission of the reporting physicians, and give practical instructions and assistance. Almost 8,000 such visits were made the first six months of this year.

To provide specialist medical diagnosis and treatment for those that cannot afford the service, the Associated Tuberculosis Clinics are operated in the various parts of the city, for which clinics the Public Health Nurse supplies the follow-up work.

These are the more important of the nurses' duties. There are so many minor tasks that fall to her hands to do that it would be impossible to enumerate them all. The above statement will suffice to convey a fair idea of the many sided character and the tremendous bulk of the work of the Public Health Nurses.

In fact the Division of Public Health Nursing has as many activities as a Community has Health Problems to solve. Those various duties carry the Public Health Nurse into homes in every section of the city, into public and separate schools, institutions of many kinds, and into the out-patient departments of the hospitals. The plan of organization is efficient because each nurse has a definite area of the city for which she is responsible, because she can bring the families in her district into touch with the necessary medical, nursing or social help.

A FAIR SOLUTION OF THE CHILD LABOR PROBLEM.

By John P. Koehler, M.D., Deputy Commissioner of Health.

After having examined several thousand children for labor permits, we feel more undecided than ever whether child labor ought to be regulated or abolished. It is not an easy matter to decide whether the child, parent, employer or state would be the loser if child labor were abolished. About 90 per cent of the children employed for labor permits were under 16 years of age. It therefore seems that if the minimum age of 14 years were raised to 16 years, before granting a labor permit, we would be

able to keep in school one or two years longer, 90 per cent of all children working under a labor permit. If children cannot be kept in school any other way, we approve of not permitting them to go to work under 16 years of age. However, the following facts must be considered in all fairness to everyone concerned, before the passing of such a law: Children having finished the 5th grade, in most instances, enter the same industries as children having finished the 6th and 7th grades. This

shows that one or two years longer in the grades does not help the children to get better positions. In order to get much out of a 6th, 7th or 8th grade education, a child should continue through high school. A plan should, therefore, be carried out which will not only make it possible for a child to remain in school a year or two longer than the 5th grade, but to make it possible for every normal child to get a high school education or its equivalent.

Our experience further convinces us, in spite of contrary findings by other men, that most children will develop better physically by doing light, regulated physical labor than by doing mental labor in schools. Therefore, we are not justified in compelling children to remain in school for health reasons. Many of these children receive better food and warmer clothing as soon as they contribute to the family income. Children who earn money will always get more consideration from neglectful parents.

About ten per cent of children applying for labor permits were without a father and three per cent without a mother. In many other families the father was sick and unable to work regularly. Other families were so large that no one could honestly expect the father to earn enough for

their support. Therefore, we may safely say that many families would suffer, if children under sixteen were not permitted to work, unless the state contributed to the income of such families.

We know of one way whereby children can remain in school until through high school and still earn enough to at least support themselves. It may appear impractical, but we do not see why it could not at least be tried out in one school and in one large factory employing children. Our plan is to have children go to school from 8 to 12 A. M. and work from 1 to 5 P. M. and another shift to work from 8 to 12 P. M. and go to school from 1 to 5 P. M. Four hours a day for mental and four hours for physical work is enough for any child under 18 years of age. If one teacher cannot handle two shifts a day, get two teachers. Our educational system must meet the needs of the people who need education. The employer of child labor must consider the needs of the child or face the abolition of child labor. Boys who work their way through college turn out to be some of our big men, so why not give our children an opportunity to work their way through the grades and high school? Give poor children a chance.

FREE LIFE SAVERS.

The Milwaukee Department of Health furnishes the following prophylactic and curative agents free of charge.

Vaccine virus for the prevention of smallpox;

Diphtheria antitoxin for the prevention and cure of diphtheria;

Typhoid vaccine for the prevention of typhoid fever;

Tetanus vaccine for the prevention of lockjaw;

The laboratory of the Department makes free examinations for the diagnosis of diphtheria, tuberculosis, typhoid fever, pneumonia, gonorrhoea, syphilis, and rabies.

 FIRST AID TO THE INJURED

SORE THROAT (TONSILLITIS, QUINSY).

Sore throat is a common disease. It is usually the result of exposure to wet and cold. Talking, laughing, or shouting in a damp, cold atmosphere is sometimes the cause of it. It may accompany or be an extension from an ordinary "cold in the head." It is a complication of diphtheria, scarlet fever, small pox, tuberculosis, and syphilis. It is caused also by drinking milk drawn from cows with sores on their teats. Sometimes the inflammation is limited to the mucous membrane of the pharynx and soft palate; it is then known as pharyngitis or acute catarrhal sore throat. More frequently the tonsils are affected, and the inflammation is then called tonsillitis. When the inflammation is more deeply seated behind the tonsil and tends to suppurate or form an abscess, the term "quinsy" is applied. An attack of sore throat may last from 2 to 10 days or longer.

Symptoms of acute sore throat are soreness on swallowing, dryness, or a chilliness and feverishness, pain or tickling or scratching sensation in the throat.

There is liable to be stiffness and some tenderness along the side of the neck. If one or both tonsils are involved, as they usually are to a greater or less extent, the symptoms are more severe. In marked cases examination shows redness and swelling of the parts affected—swollen tonsils (tonsillitis) and white or cream-colored spots may be seen on the sur-

face of one or both tonsils. (This form of the disease is frequently mistaken for diphtheria.) There may be high fever and great prostration.

In the severest form of tonsillitis (quinsy) the tonsil is hard and swollen to twice or three times its natural size, and the patient is unable to swallow or to open his mouth beyond a fraction of an inch. The saliva dribbles away; if suppuration occurs the tonsil gradually softens until the abscess breaks. With the discharge of pus the severe pain is relieved and the patient rapidly recovers. If the abscess is large, and if the pus is discharged in a backward direction there is danger from suffocation, particularly if the abscess break during sleep. Fortunately the abscess usually points toward the mouth, and the pus runs out.

Treatment.—Persons who are subject to attacks of sore throat should keep their feet dry and be careful not to catch cold. If a case develop, give a gargle of salt water or potassium chlorate and water (saturated solution), or boric acid and water may be applied to the tonsil. Dry bicarbonate of soda (baking soda) is highly recommended as a local application, a small quantity to be applied every hour. Apply cold water or a light ice bag to the neck, or a thick piece of flannel saturated with ice water may be placed around the neck and covered with muslin. Small pieces of ice placed in the mouth are usually agreeable. The bowels should

be kept open by means of Epsom salts.

If the cold applications to the neck do not give relief, or if they are not agreeable to the patient, apply hot water or poultices and give hot gargles, or let the patient gargle with

hot tea. If the swelling is very great, he can not gargle. Since sore throat may be a symptom of a more serious condition, it is always best to call in a physician early.—United States Public Health Service.

COUGHS AND COLDS.

When a person has a cough that lasts more than two or three weeks, even though the symptoms are mild, the case is serious enough to require an examination by a physician, and one should be consulted on the first opportunity.

A case of bronchitis or bad cold usually begins with a cough, sometimes starting with an irritation in the throat, which gradually travels down into the lungs. Though the cough at first is dry, there will be some expectoration later on, especially marked in the morning on first arising. It may at first be white and tenacious, later on becoming yellowish. With this there will be some soreness over the upper and front part of the chest, and if the cough is violent there will be considerable soreness of the muscles between the ribs.

Treatment.—For the soreness over the chest a good rubbing with soap

liniment may help to relieve the symptom. The bowels should be kept open by a tablespoonful of Epsom salt, when necessary.

Patients with coughs and colds should not be kept in a hot, dry room without ventilation. Plenty of fresh air should be allowed to come into the room, with the precaution, however, that the patient be not exposed to a draft and that he be properly clothed so as not to become chilled when the weather is cold.

A cold in the head may often be aborted if the patient, when he feels the cold coming on, will take a hot bath or a hot mustard foot bath, go to bed, drink hot lemonade or hot weak tea, and cover himself up well until a good perspiration is induced. Care should be taken next day to wrap up carefully if he goes out of the house, as otherwise the symptoms may return in greater severity.—United States Public Health Service.

PHYSICAL EDUCATION AND NATIONAL GROWTH

General Wood states that approximately 30 per cent of the men of military age were rejected as unfit. Of the remaining 70 per cent who were sent to the training camps, 8 per cent were rejected as unfit for military service, and this under standards much lower than those in effect in the Regular Army in

time of peace. It is safe to say that 50 per cent of our men were unfit for field service in war. This is bad enough from the military standpoint, but it is even more serious from the standpoint of industrial efficiency. In the men from the South came a large proportion with hook-worm and its attendant anaemia and sluggishness of mind and

muscle. There was also a large percentage of vice diseases. The state should take a much broader and deeper interest in the welfare of its youth. More thorough instruction is needed in personal hygiene. A powerful agency in cor-

recting existing physical defects will be found in universal training for national service, and our physical training must be broad enough also to reach the girls and young women of the land.—The American Journal of Public Health.

WHY REGISTER BIRTHS?

That the birth, date of birth, parentage and other essential information for governmental and identification purposes may be made a matter of official record.

That the ages of school children may be definitely known, making the proper enforcement of school laws possible.

That the laws affecting child labor may be effective, and the children of the poor thereby protected.

That litigation in matters of inheritance and settlement of estates may be simplified by the definite

knowledge of the ages of all persons concerned.

That the American-born children of foreign-born parents may have indisputable evidence of American birth which will protect them from enforced military service when visiting the mother country of the parents.

That blindness may be prevented by prompt medical attention to the infected eyes of the new born.

That infection and mortality among women may be prevented and that young babies may be saved by immediate attention by existing agencies for the relief of the poor.—Bulletin Kansas State Board of Health.

WHY REGISTER DEATHS?

That there may be available complete and accurate information as to deaths of all human beings, with dates of death and causes of death, to the end that preventable causes of death may be eliminated and human lives lengthened.

That the various public health agencies—national, state and municipal—may determine what part of our mortality is preventable and when and where preventable deaths occur.

That pestilential and epidemic diseases may be detected promptly.

That we may apply our remarkable scientific knowledge of disease prevention at the time and in the place

where such application is most needed.

That home-seekers and immigrants may be guided in the selection of safe and healthful homes by accurate information rather than by misstatement of interested persons.

That the settlement of estates and matters of inheritance, pensions, etc., may be definitely settled by official record of death instead of on the memory of interested witnesses.

Death registration without birth registration is like an accurate accounting of expenditures without consideration of income.—Bulletin Kansas State Board of Health.

MILWAUKEE HEALTH DEPARTMENT SERVICE DIRECTORY.

Sixth floor City Hall:
Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Eighth Floor:
Tuberculosis Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

SOUTH SIDE DISPENSARY, WOOLWORTH BLDG., 5TH AVE. AND MITCHELL ST.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY (MARQUETTE MEDICAL SCHOOL), 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 60.
Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.
Visiting Hours, 3 to 5 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.
Visiting Hours, Sunday, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HOW TO LIVE.

LESSON VIII.



DENTAL HYGIENE.

Teeth are the first aid to digestion.

To digest food well requires proper mastication; proper mastication demands good teeth.

Bad teeth produce stomach trouble.

Bad teeth mean infected teeth; infected teeth cause absorption of pus; pus absorption produces poor health.

Have all decayed teeth looked after promptly; have a dentist examine your teeth once a year or oftener.

Keep your teeth in good condition by keeping them clean.

BRUSH YOUR TEETH AT LEAST TWICE DAILY.



Milwaukee Health Department.

How Much for Health?

Per Capita Cost of Health Department
Work as compared with other
city departments

BUDGET FOR 1918

Department of Public Works.....	\$7.27
School Board	6.80
Fire Department	2.40
Police Department	2.38
Continuation School	1.21
Park Board	.98
HEALTH DEPARTMENT	.69

Milwaukee Health Department.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

OCTOBER 1919.

Vol. 9, No. 10.

Colds

Are

Contagious

*THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF
HEALTH AND SANITARY SCIENCE FACULTY*

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

C. L. KENNEY, M. D.,
Contagious Diseases.

RUSSELL W. CUNLIFFE,
Chemistry.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE E. ADAMS,
Vital Statistics.

GEORGE R. ERNST, M. D.,
Tuberculosis.

T. F. THOMSON, M. D.,
Sanitation.

F. E. CHURCH,
Bacteriology.

H. H. BRYANT, D. V. S.,
Food Hygiene.

AGNES J. MARTIN, R. N.,
Supervisor of Nurses.

ORDINANCE YOU OUGHT TO KNOW.

Relating to the beating of rugs, carpets, etc.:

Section 1293.5. No carpets, rugs, mats or similar articles shall be beaten, shaken or swept in any public thoroughfare or in any court or areaway within fifteen feet of any building or buildings occupied by more than two families.

Section 1293.6. No old garments, bedding, mattresses, coverings, rugs, carpets or similar articles shall be beaten, shaken or swept upon or within fifteen feet of any inhabited building unless precaution is taken to prevent dust particles from being blown, scattered or otherwise passing from the place where such beating or cleaning is carried on.

Section 1293.7. Any inhabitant of said city upon using any carpet

sweeper or vacuum cleaner in said city, after using same shall remove the contents of said sweeper or vacuum cleaner into some proper receptacle or wrapper and convey same to incinerator, furnace, fireplace, or stove.

Section 2. Section 1294 of the Milwaukee Code of 1914 is amended to read:

Section 1294. Any person violating any of the provisions of the three preceding (sections) sections shall on conviction be fined not less than five dollars nor more than fifty dollars for each and every offense, or, in default of the payment of the same, be imprisoned in the house of correction of Milwaukee county for a period of not less than ten or more than sixty days, in the discretion of the court.

**Do unto others, as you would have others do
unto you.**

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

OCTOBER 1919

HOW TO BE HEALTHY AND HAPPY.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

Health and happiness are closely related, but not dependent on each other. An individual may be sick and still be happy, or he may be the picture of health and yet be very unhappy. Health depends upon the condition of the body mostly, while happiness is dependent upon the mind.

If you want to be healthy you must do the things that promote health:

1. You must breathe fresh air.
2. You must eat proper food.
3. Eight hours for work, eight hours for sleep, and eight hours for meals and recreation.
4. You must rest at least one day a week.
5. Avoid bad habits and cultivate good habits.

If you want to be happy you must do the things that promote happiness:

1. Be an optimist. Don't worry! Don't cross the bridges until you come to them.
2. Be contented. You can't be happy when you are continually dis-

satisfied. Make the best of your present situation by trying hard to improve it and don't forget that things might be worse. Don't think of others who are making more money than you are, but think of those who are making less. Listening to the words of agitators and carrying out their programs will never make you happy. Don't do just enough work to hold your job, but work so that your job will hold you, no matter what your price may be.

3. Happiness is contagious. You can't be happy unless you make others happy. If you are grouchy those about you will be grouchy. Money does not make people happy. Many paupers are happier than multi-millionaires.

Your happiness depends upon yourself more than anything else in the world.

You can make yourself happy or miserable, just as you like, because happiness is a mental condition and not controlled by outside factors.

Laughing cheerfulness throws sunlight on all the facts of life.

—RICHTER.

Health Supervision of School Children.

BY DR. GEO. P. BARTH.

Health or Hygiene supervision of school children, or as it is more commonly, though erroneously called, Medical Inspection, is practically indispensable in school organization and administration today. About eighty-five per cent of people depend on their physical well-being rather than on mental attainment to gain a livelihood. The state compels all parents to give the children into its charge for about five hours each day during the most important period of life—the growing and developing period. This is as it should be, for the progress and profit of the state is directly proportionate to the ability and vigor of its citizens. School children come from all walks in life and from every kind of home, and all mingle freely at the school. This being the case, they are exposed to dangers of infection of all sorts. The least the state can do in return for a compliance with the compulsory attendance law is to return the child to the parent in as good condition physically as it was when it was received. This means protection against disease and physical and mental harm while the child is in attendance at school.

Health supervision is not of recent origin. As early as June 28, 1833, the law of France charged the school committees of the cities and towns with the care of keeping the school houses clean. The decrees of 1842 and 1843 ordered that every public boys' or girls' school should be visited by a physician who was to inspect the localities in which the schools

were located and examine into the general health of the school children. Brussels, in Belgium, inaugurated a system of medical inspection in the full modern sense of the term in 1874. Sweden established a national system in 1878. In 1882 Cairo, Egypt, employed school physicians; Moscow in 1888; Chili in 1888; Leipsic and Dresden in 1889.

The first beginnings of health supervision in the United States were made in New York and Boston in 1894, Chicago in 1895, and Philadelphia in 1898.

Japan, in 1898, by order of the Minister of Education, established one of the finest systems now in existence. England established nation-wide medical inspection in all its schools, January 1, 1908.

In its beginning the purpose was merely to prevent the spread of contagious diseases among children. Today, however, it covers a much wider field. It is not a philanthropic undertaking, nor a fad; nor is it a mere gathering of anthropometric data. It is an organized effort to help teachers to meet their responsibilities towards the child bodies which control so effectively the child brains, which it is their business to assist, to help parents to keep their families properly nourished and clean in mind and body, to help the taxpayer to get all that he pays for in the way of education, and to help build up with more certainty and security a race of strong, healthy, well-balanced men and women.

Milwaukee established a Hygiene Department of schools in 1909 upon the recommendation of the Milwaukee Medical Society after a preliminary survey of the schools as to its necessity. The conditions in the schools revealed by this survey were such that immediate organization of the department was considered necessary.

The city today has one of the best systems in existence anywhere. In order to derive the greatest benefit from the system, it is absolutely necessary that the school doctors and school nurses have the thorough co-operation and support of all the principals and teachers, and more particularly of all the parents.

A doctor or a nurse visits each of the schools in the city every day and

examines all the children who do not seem well, or who show signs of some disease. The nurses visit the homes of the children to consult with the parents as to what should be done in order to make the child healthy and strong, or what to do in order to make the progress of the child through the school easy and rapid, where such progress has been interfered with because of the presence of some physical defect.

The school hygiene service which was formerly conducted by the Board of School Directors and the Health Department has now been combined and the entire work of both the public and parochial schools is carried on by the Health Department.

The offices of the Department are in the City Hall.

SCHOOL HYGIENE NOTES.

As far as we are able to ascertain, the parochial schools of Milwaukee are the first in the country to weigh their children monthly. The Survey, a magazine published in New York, which gives special attention to the latest and best in social service and health work, has a half page devoted to the good work done by our parochial schools, in its September 27th issue.

Letters are reaching this office almost daily, asking about our monthly weighing contests.

Some of our schools were handicapped this month because we were unable to supply them with class room weight records. The printer is at them now, and before another week is up, we will have enough new weight records to supply all schools.

The October reports show the following winners:

Rooms with lowest percentage of absentees:

St. Roses—5, 6 grades.....	0. %
St. Thomas—1, 2, 3, 4, 8 grades.....	0. %
St. Patricks—1 and 2, 7, 8 grades.....	0. %
St. Boniface—1A, 1B, 4, 7, and 8, 6, 7 grades.....	0. %

Schools with lowest percentage of absentees:

St. Thomas	1 ½ %
St. Martini	2 %

Rooms with lowest percentage of defective teeth:

St. Rose—2 and 3, 2, 5, 6 and 7, 8 grades.....	0. %
St. Thomas—7, 8 grades.....	0. %

School with lowest percentage of defective teeth:

St. Rose	8 %
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Room with lowest percentage of children under weight:

St. Marcus Lutheran — Kindergarten	4 %
--	-----

School with lowest percentage of children under weight:

St. Rose	28 ½ %
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Special Mention:

St. Cyril	Cross Luth.
St. Leo	St. Michael
St. Martini	St. John Kanty
St. Lawrence	Immanuel
St. Patricks	Emmaus
H. Ghost Luth.	St. Boniface

THE COMMON COLD.

One "catches cold" from some one else who has a cold. When you have a cold you may know that you "caught it" in one of these ways: By direct contact—for example kissing; or shaking hands and later carrying your own hand to your mouth, or nose. (2) By indirect contact—for example, using the same handkerchief, towel, drinking cup, or eating from utensils used by a victim of a cold. Children particularly are prone to "catch cold" by using the family "handkerchief," or by using the same pencils or toys, or by "swapping" chewing gum or candy. (3) By being near when some one with a cold coughs or sneezes. (A cough or sneeze forces a host of germs into the air; you breathe them in.)

There are always germs in the nose and throat. Most of them are made harmless by substances in the blood. However, certain germs are so strong or so numerous that these substances cannot destroy them. There are times too, when the body is unable to manufacture these protecting substances. The things which retard the body in producing these substances are: (1) Chilling—especially through wet and cold feet. Infants may become chilled because of being dressed too lightly, and also by exposure after being overheated by overdressing. (2) Loss of sleep. Plenty of sleep is nature's great restorer. It restores vitality. (3) Eating foods which place a tax on the stomach and bowels, inviting constipation or indigestion. (4) Under-feeding which makes a poorly nourished and weak body. (5) Rickets, a disease, usually of child-

hood, caused from lack of fresh green foods in the diet. (6) Overwork, either physical or mental. A physically exhausted, "wornout" body is in poor shape to fight infection. (7) Adenoids and enlarged tonsils are nests for germs.

The prevention of colds depends largely on those who have colds, though all should endeavor to avoid having colds. Persons who have colds must see that they do not pass it on to others in the discharge from their noses and throats. Accordingly, they must cover the mouth and nose when coughing or sneezing. Neither should they kiss anybody while they have the cold. They should wash their hands before touching a baby.

These are the things which must be done when a child has a cold. They should also be followed when an adult has a cold if it is at all possible. Go to bed and remain there quietly as long as there is a fever. In cold weather do not go out of doors until all signs of the cold have disappeared. Consult a physician. At the onset of the cold a cathartic such as castor oil must be taken. The diet should be simple, and plenty of water must be drunk.

In summing up, we may give the following warnings:

Everybody is constantly exposed to colds.

Keep the body in the best physical condition, and you will prevent most colds.

Keep the body clean, inside and out.

Get plenty of sleep.

—Exchange.

COMMUNITY NURSING.

By AGNES J. MARTIN, R. N., Supervisor of Nurses.

The past week marked an important event in the history of the nursing service of the city when the medical inspection of the public schools came over to the Department of Health. While the nursing personnel was small, only eleven nurses, and they bring the supervision of some 83,000 children in 72 different schools, we believe that we are going to be able to give better service to every branch of the work with our united staff.

The nurse passing Trinity parochial school to give service to Prairie St. school will now call at both, and care for the families of both, who usually are next door neighbors.

The city has been divided into 35 districts with one nurse to each district, in which she is responsible for the development of health activities along the lines of school, child welfare and tuberculosis work. It is a big job for most of them, some districts running as high as 3,000 to 5,000 school children, 75 to 100 child welfare cases, and from 100 to 125 active or observation cases of tuberculosis. The redeeming feature, if there be one for a nurse in such a district, is that usually these conditions prevail in a thickly populated

part, where most of her children are in three or four schools, some cases even two, and where her families are close neighbors, obviating long, tiresome and time consuming car rides. Thus, too, the improved mental and physical condition of Johnnie after his tonsils are removed, or the changed disposition of Mrs. Jones' cross baby after she begins taking it to the child welfare clinics, are indisputable arguments in favor of the work. The more such results are accomplished, the easier it will be to persuade other parents to carry out the doctor's and nurse's instructions.

For the present, the nurse will devote her mornings to the schools, with the afternoon for child welfare and tuberculosis work in both clinic and home.

There are many more things we would like to do, such as organize groups of children according to age, for definite instruction in personal hygiene, even home nursing to older girls, and lessons in plain, wholesome cookery for inexperienced mothers. With these things definitely in mind we hope to realize a healthier, happier Milwaukee through our new health stations if the city sees fit to increase our staff.

LECTURES TO TEACHERS.

A special course on the essentials of School Medical Inspection has been prepared by the Health Department for the teachers in public and parochial schools. It is the purpose of the department to give in these lec-

tures the essentials of the work of school medical inspection, so that the best co-operation of the teachers can be secured. The first of these lectures, which was recently given, brought out an attendance of over two hundred teachers.

DYSPEPSIA.

UNITED STATES PUBLIC HEALTH SERVICE.

Dyspepsia is only a symptom of disease, and is often not due to the disease of the stomach itself. There are only two serious diseases of the stomach, ulcer and cancer, neither of which is a common complaint. Dyspepsia may result from nervousness. Emotional dyspepsia is very common. Everyone knows how bad news or worry will interfere with digestion and be followed by distress after a meal. Consumption is often accompanied by stomach trouble; in fact, this may be the only complaint made by a patient suffering from this disease. Disease of the heart, especially such as causes stagnation of blood in the abdominal organs; of the liver, such as is produced by alcohol or gallstone; of the intestines, particularly if there is constipation or obstruction of the free passage of the bowel contents; of the kidneys, as in chronic inflammation of those organs, where the waste products of the body are not fully eliminated; of the brain, as where there is a tumor or inflammation of the cerebral membranes—all give rise to stomach symptoms.

There may be only a sense of fullness or distress after eating; there may be a burning or gnawing sensation in the center of the upper part of the abdomen or severe paroxysms of pain which double the patient up. These symptoms may be accompanied by nausea and vomiting or the eructation of gas or sour liquid. Gas may be passed from the intestines. The patient is inclined to be despondent

and take a gloomy view of things in general. There may be an absence of appetite, with weakness and loss of weight, resulting from the taking of an insufficient amount of food.

If a person has no serious disease he should be able to digest without distress nearly all classes of food. The cutting out from a diet of certain substances, such as fats, starches or meats, may give rise to constipation and intestinal fermentation, which result in dyspepsia. It is not a good practice, therefore, to limit oneself to certain foods unless it is done under the order of a physician or until, after repeated trials, it is found that certain articles always disagree. Very often the fault is not in the food, but in the state of mind of the eater. The simplest articles of food will sometimes cause dyspepsia if one is subject to worry of any sort. Constipation is one of the chief causes of dyspepsia, and its avoidance will often prevent this condition arising.

A teaspoonful to a tablespoonful of milk of magnesia taken every three hours will often allay dyspepsia symptoms. This medicine neutralizes the increased acidity of the stomach contents and also opens the bowels. A teaspoonful of bicarbonate of soda in a glass of water one hour after meals frequently acts as a preventive. Twenty grains of subcarbonate of bismuth taken with this soda is of value, but it may increase the tendency to constipation. A good plan is to alternate them; when the bowels

are too loose, take bismuth; when constipated, use magnesia. A little peppermint added to these mixtures makes them more palatable. During an acute attack of dyspepsia it may be necessary to reduce the diet and only take a little milk or thin soup, but no permanent change in the diet should be made without the advice of a physician, as the dyspepsia may not only not be diminished thereby but it may even be increased by such a course. Great care should be taken to keep the bowels open by going to the closet at a regular time each day, even if there is no disposition for the bowels to move, by eating articles containing plenty of cellulose, such as coarse bread, whole wheat bread, oat-meal, etc. This substance forms part of the residue remaining after digestion and stimulates the intestines to

contract, thus pushing the contents along. Fats, especially in children, tend to prevent constipation, and their absence from the diet will often cause this condition. Olive oil used in the form of salad dressing is one of the best means of correcting constipation. Fruits will often act in the same way. Cooked fruit, although not as efficacious as raw fruit in its action on the bowels, is less liable to disagree. Laxatives such as licorice powders, cascara, aloin, agar-agar, and Russian oil are often employed, but it is best not to use laxatives if the bowels can be regulated by the eating of a proper diet. Purgatives, such as salts, calomel, and jalap, which are somewhat violent in their action, should be rarely used, and then only when their need is clearly indicated.

READY FOR THE CENSUS.

One hears of remarkable changes in the relative size of cities to be revealed next year. All but the first three in the country are to change rank, it is predicted. City growth has been enormous. These things always command place; size is a good advertisement, and the city which drops behind comes in for sympathy and explanation.

How long is this going to be? When are we going to have a schedule which ranks cities for something that means more than size and congestion? Is it

not worth more to residents that a city shall advance in its care of human life, in its standard of living, in its efficiency in making taxes promote public good? Growth is worth while; stagnation is bad. But we have cities which have grown so much faster than they have learned how to live that the sight of their monotonously stretched out rows of tenements and the ever-renewed clamor of their riots and disorders go far to destroy the imposing percentage in the population column once in 10 years.—Milwaukee Journal.

DON'T NEGLECT A COLD!

VENTILATION.

FROM "HOW TO LIVE."

The most important features of ventilation are motion, coolness, and the proper degree of humidity and freshness.

There is an unreasonable prejudice against air in motion. A gentle draft is, as a matter of fact, one of the best friends the seeker after health can have. Of course, a strong draft directed against some exposed part of the body, causing a local chill for a prolonged time, is not desirable; but a gentle draft, such as ordinarily occurs in good ventilation, is extremely wholesome.

It goes without saying that persons unaccustomed to ventilation, and consequently over-sensitive to drafts, should avoid overexposure while they are in process of changing their habits. But after even a few days of enjoyment of air in motion, with cautious exposure to it, the likelihood of cold is greatly diminished; and persons who continue to make friends with moving air soon become almost immune to colds.

The popular idea that colds are derived from drafts is greatly exaggerated. A cold of any kind is usually a catarrhal disease of germ origin, to which a lowered vital resistance is a predisposing cause.

The germs are almost always present in the nose and throat. It is exposure to a draft plus the presence of germs and a lowered resistance of the body which produces the usual cold. Army men have often noted that as long as they are on the march and sleep outdoors, they seldom or

never have colds, but they develop them as soon as they get indoors again.

Of course, one must always use common sense and never grow fool-hardy. It is never advisable that a person in a perspiration should sit in a strong draft.

The best ventilation is usually to be had through the windows. We advise keeping windows open almost always in summer; and often open in winter.

One should have a cross-current of air whenever practicable; that is, an entrance for fresh air and an exit for used air at opposite sides of the room. Where there can not be such a cross-current, some circulation can be secured by having a window open both top and bottom.

In winter, ventilation is best secured by means of a window-board. This is a board the edge of which rests on the edge of the window-sill, the ends being attached firmly to the window-frame. It affords a vertical surface three or four inches high and situated three or four inches in front of the window, so as to deflect the cold air upward when the window is slightly opened. The air will then reach the breathing-zone, instead of flowing on to the floor and chilling the feet, which is the usual consequence of opening a window in winter. It seems tragic to think that for lack of some such simple device, which any one can make or buy, there is now an almost complete absence of winter ventilation in most houses.

Most people enervate themselves by heat, especially in winter. The temperature of living-rooms and work-rooms should not be above 70 degrees. Heat is depressing. It lessens both mental and muscular efficiency.

In the cold season, indoor air is often too dry and may be moistened with advantage. This may be done, to some extent, by heating water in large pans or open vessels. But for efficient moistening of the air, either a very large evaporating-surface or steam jets are required. The small open vessels or saucers on which some people rely, even when located in the

air-passages of a hot-air furnace, have only an infinitesimal influence. Vertical wicks of felt with their lower ends in water kept hot by the heating apparatus yield a rapid supply of moisture. Evaporation is greatly facilitated if the water or wicks are placed in the current of heated air entering the room. By a suitable construction, the water may be replenished automatically. In very cold, dry weather, the air-supply of an ordinary medium-sized house requires the addition of not less than 10 gallons of moisture every 24 hours, and sometimes much more.

PATENT MEDICINES

The Health Department is intensely interested in the health of every inhabitant of Milwaukee, and therefore advises as follows:

When you are sick or imagine that you are sick, don't buy patent medicines, but consult a physician.

When you feel the high cost of living don't spend your money for patent medicines.

For the information of the public in general, we wish to state that if we were sick or even afraid of becoming sick, or had any member of our family sick, we would not use any of the following things: Tanlac, Pape's Cold Compound, Dr. N. A. Goddard's Treatments, Ely Cream Balm, Chiropractic Treatments,

Kopp's Baby Friend, Peruna, Lydia E. Pinkham's Compound, Beecham's Pills, Swamp Root, Sanitol, Wine of Cardui, Pane's Celery Compound, Doan's Kidney Pills, King's New Discovery for Consumption, Dr. William's Pink Pills for Pale People, Dr. Edward's Olive Tablets, Marmola Prescription Tablets, Oil of Korein, Pape's Diapepsin, Hall's Catarrh Cure, Piso's Consumption Cure, Swift's Specific Co., Winslow's Soothing Syrup, Begy's Mustarine, Pinex, Ki-Moids, Bulgarian Blood Tea, Number 40, advertised by Central Drug Co., Nuxated Iron, Advertised Cancer Cures, Advertised Catarrh Cures, Advertised Tuberculosis Cures, Aspirin without doctor's supervision.

Communicable Diseases are preventable; report them to the Health Dept.

GIRL SCOUTS.

The Girl Scouts, a National organization, is open to any girl who expresses her desire to join and voluntarily accepts the promise of the Laws.

The object of the Girl Scouts is to bring to all girls the opportunity for group experience, outdoor life, and to learn, through work, but more by play, to serve their community. Patterned after the Girl Guides of England, the sister organization of the Boy Scouts, the Girl Scouts have developed a method of self-government and a variety of activities that appear to be well suited to the desires of the girls, as the 60,000 registered Scouts and the 5,000 new applicants each month testify.

The activities of the Girl Scouts may be grouped under five headings corresponding to five phases of women's life today; 1, The Home-

maker; 2, The Producer; 3, The Consumer; 4, The Citizen; 5, The Human Being.

The Girl Scout Laws are ten:

1. A Girl Scout's Honor is to be trusted.
2. A Girl Scout is Loyal.
3. A Girl Scout's Duty is to be Useful and to Help others.
4. A Girl Scout is a Friend to all, and a Sister to every other Girl Scout.
5. A Girl Scout is Courteous.
6. A Girl Scout keeps Herself Pure.
7. A Girl Scout is a Friend to Animals.
8. A Girl Scout Obeys Orders.
9. A Girl Scout is Cheerful.
10. A Girl Scout is Thrifty.

—From National Girl Scout Magazine.

SORE MOUTH.

This condition is met with more in children than in grown persons. Its chief causes are improper cleansing of the mouth, bad teeth, excessive use of mercury, and occasionally it accompanies scarlet fever, measles, tonsillitis, or sore throat.

Symptoms:—There is redness of the lining membrane of the mouth. The lips and gums may be swollen and the tongue indented by teeth marks. The saliva is increased and often dribbles from the corner of the mouth. The changes in this secretion may produce a disagreeable taste and cause the breath to be foul. There

is pain and distress on taking food. Little white spots may appear, which in bad cases may terminate in small ulcers.

Treatment:—The baby's mouth should be carefully cleansed at least once each day with a clean cloth soaked in a solution of boric acid (a teaspoonful of boric acid in a glass of hot water). If the mouth becomes sore, this solution should be used frequently, and especially after each meal. If the inflammation is severe, call a physician.—U. S. Public Health Service.



FIRST AID TO THE INJURED



PLEURISY.

Pleurisy is caused by exposure to cold or wet. In nearly all cases, however, there is an underlying diseased condition present, such as tuberculosis, rheumatism, gout, chronic alcoholism, or heart or kidney disease. It may arise as an extension of inflammation from the lungs and their neighboring organs, being more common with lung fever, the pneumonia of adults, than with bronchial pneumonia, the pneumonia of children. Pleurisy may also follow injury to the chest wall.

Symptoms:—The first sign is a pain in the chest, often called a "stitch in the side," which is worse when breathing rapidly or moving around. There is a dry, distressing cough, which the patient tries to restrain in order to avoid the pain which it causes. The usual signs of fever, such as an increased pulse rate, hot skin, and flushed face are present. After a day or two there may be an effusion of fluid into the pleural sac. When this occurs pain will be less but the breathing will be more difficult. In favorable cases, this fluid is absorbed in a few weeks and the patient recovers; when this does not occur, the physician has to draw it off through a hollow needle.

Prevention:—The best way to prevent pleurisy is to keep the body as healthy as possible; then it is not so liable to be affected by cold and wet. Every person should live out doors as much as he can and see that there is plenty of fresh air present when he has to remain indoors. During sleeping hours, windows in bedrooms should be kept open. Persons who suffer from gout or rheumatism should be especially careful not to expose themselves to inclement weather.

Treatment:—In order to lessen the pain the patient should be put to bed and the affected side should be strapped with strips of adhesive plaster. This is done by taking 4-inch strips and applying them as tightly as possible from the middle of the chest in front to the center of the back. Other strips are then applied, each one slightly overlapping the one above, until five or six of the strips have been placed in position. Cold applied to the side by means of ice or ice water in a rubber bag will often relieve pain. Needless to say, every case of pleurisy should be under the care of a physician.—U. S. Public Health Service.

Miss Agnes J. Martin, R. N., the new supervisor of nurses in the Health Department, comes to us from Chicago, where she has been Assistant Supervisor of Public School Nursing. Miss Martin has also been associated with Miss Helen Kelly, of the Chi-

cago School of Civics and Philanthropy. During the war, Miss Martin has been in the government service, filling positions in hospitals both here and abroad. Miss Martin brings most excellent qualifications for the difficult position for which she has assumed responsibility.

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.**Sixth floor City Hall:**

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Eighth Floor:

Tuberculosis Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.**TUBERCULOSIS****EIGHTH FLOOR, CITY HALL:**

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

SOUTH SIDE DISPENSARY, WOOLWORTH BLDG., 5TH AVE. AND MITCHELL ST.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY (MARQUETTE MEDICAL SCHOOL), 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.**SOUTH VIEW HOSPITAL.**

Telephone, Orchard 60.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.

Visiting Hours, Sunday, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid bacterine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HOW TO LIVE.

LESSON IX.



CHEERFULNESS.

Perfect health brings cheerfulness, and cheerfulness brings health.

Worry undermines health and shortens life.

Cheerfulness drives out worry and makes work easier.

Cheerfulness makes friends and opens the door to success.

Cheerfulness is contagious: "Smile and the world smiles with you!"

CULTIVATE CHEERFULNESS.



Milwaukee Health Department.

How Much for Health?

Per Capita Cost of Health Department
Work as compared with other
city departments

BUDGET FOR 1918

Department of Public Works.....	\$7.27
School Board	6.80
Fire Department	2.40
Police Department	2.38
Continuation School	1.21
Park Board	.98
HEALTH DEPARTMENT	.69

Milwaukee Health Department.

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NOV 12 1919

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

NOV.-DEC. 1919.

Vol. 9, Nos. 11-12.

UNLESS this country is made a
good place for all of us to live
in, it won't be a good place
for any of us to live in.

—THEODORE ROOSEVELT.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

C. L. KENNEY, M. D.,
Contagious Diseases.

E. T. LOBEDAN, M. D.,
Child Welfare.

GEORGE R. ERNST, M. D.,
Tuberculosis.

F. E. CHURCH,
Bacteriology.

GEO. P. BARTH,
School Hygiene.

RUSSELL W. CUNLIFFE,
Chemistry.

GEORGE E. ADAMS,
Vital Statistics.

T. F. THOMSON, M. D.,
Sanitation.

H. H. BRYANT, D. V. S.,
Food Hygiene.

AGNES J. MARTIN, R. N.,
Supervisor of Nurses.

ORDINANCE YOU OUGHT TO KNOW.

Cleaning of sidewalks of snow and sprinkling with ashes, sawdust or sand.

The owner, occupant or person in charge of each and every tenement building in the city of Milwaukee, fronting upon or adjoining any street, and the owner or person in charge of any unoccupied building or lot fronting as aforesaid, shall clean the sidewalk in front of or adjoining such tenement or building or unoccupied lot or building, as the case may be, of snow or ice to the width of such sidewalk by twelve o'clock noon of each day, and cause the same to be kept clear from snow or ice; provided, that when ice has so formed on any sidewalk that it cannot be removed, then the persons herein re-

ferred to shall keep the same sprinkled with ashes, sawdust or sand; provided, also, that in case snow shall continue to fall for some time, then, and in that case, it shall be removed immediately after the same shall cease to fall.

Any person who shall fail to comply with the provisions hereof shall forfeit for each offense the sum of not less than one dollar nor more than five dollars, and the further sum of five dollars for each and every day said violation is continued. In construing the provisions of this section, where the premises are occupied, the occupant or person in charge shall be deemed the proper person whose duty it shall be to comply with the provisions of this section.

A clean house with plenty of fresh air and sunshine is a long step in the direction of health says the United States Public Health Service.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

NOV.-DEC. 1919

THE 1920 BUDGET. An Appreciation.

BY GEORGE C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

At the present writing, the larger part, and the most important of the Health Department's requests for the 1920 budget have already been favorably acted upon by the Common Council. It seems certain now that final action of the Council will provide the \$1.00 per capita for health which the Health Department has asked for.

This is a most gratifying achievement, and one that holds definite promise for improved health conditions in Milwaukee.

While, in the main, the health records of Milwaukee compare very favorably with those of most of the large cities, and with the country at large, it is and has been clear to those familiar with the health needs of the city, that the results obtained here so far are not as good as might be, and that still better work can be done provided the necessary means are furnished.

Fortunately, for the good of the city, public opinion seems to be awakened more than ever to the realization of these facts, and to an appreciation that good health constitutes the biggest asset of a community.

The passage of the 1920 budget, which will make a substantial addition to the personnel list of the

Health Department, is a frank avowal of public opinion for more and better health protection.

We feel certain that public confidence will not be disappointed. The investment in health will bring definite and commensurate returns, and while the full measure of the good which the enlarged service is bound to bring, will be determinable only within the space of years, we are, nevertheless, confident that even within a year's time, the benefits will be apparent in a reduced infant morbidity and mortality rate.

To the many agencies that have come to the support of the Health Department for the passage of the 1920 budget, as well as for the splendid co-operation which these agencies are constantly giving, the Health Department wishes herewith to acknowledge its appreciation and indebtedness.

In a like manner do we feel is the Common Council deserving of credit and public approbation for seeing and providing for the greater health needs of the city. The furtherance and promotion of health is the best service those elected to public service can render to their constituency. The Council has acted both wisely and well.

PNEUMONIA.

UNITED STATES PUBLIC HEALTH SERVICE.

When a person suddenly has a severe chill followed by a high fever, flushed face, difficult breathing, and a pain in his chest, he may be suffering from pneumonia, and as this is a dangerous disease the services of a physician should be obtained at once.

The disease is due to a germ known as the pneumococcus. It is a constant inhabitant of the throats of healthy people and apparently does no harm until the resistance of the body is lowered by disease, lack of food, drunkenness, or exhaustion due to severe physical exercise. Persons frequenting badly ventilated stores, factories, theaters, street cars, or other places where there are crowds are liable to contract pneumonia. Chilling of the body when overheated may bring on an attack. Many elderly persons suffering from chronic diseases die of pneumonia, the disease being often spoken of then as a terminal pneumonia.

Pneumonia is usually characterized by the following symptoms: The sputum is abundant, tenacious, and of a reddish-brown color, whence the name "rusty sputum." The color is due to the admixture of small quantities of blood. The pulse at first is full and bounding, but later may become weak, rapid, and barely perceptible at the wrist. Breathing is embarrassed, the respiratory movements are rapid, 30 to 50 per minute, the patient is restless and often can not lie down, but has to be propped up in bed or sit in a chair. There may be delirium, and if not watched the patient may

jump out of a window and injure himself severely. The fever in a typical case remains high until the seventh or ninth day, when it will frequently drop to normal in a few hours. This is called the crisis, and if there are no complications it is followed by great improvement in the patient's condition and he generally goes on to recovery. In other cases the temperature does not return to normal, but only falls a degree or two for a short time and then rise again. This is called the false crisis and is of unfavorable import, especially if accompanied by profuse sweat and blueness of the skin.

A little care and common sense will go a great ways in avoiding the development of pneumonia. Do not expose yourself to a draft when overheated. When chilled do not drink whisky or other alcoholic beverage, as the liability to contract pneumonia is increased by alcohol, for although it gives a feeling of well-being, the temperature of the body is lowered and the power to resist disease is diminished by its use. A cup of hot tea or coffee, on the other hand, is beneficial and helps to restore the body to its normal condition. It should be remembered that pneumonia is a communicable disease, and that it may attack nurses and those who are waiting upon the patient. This is especially liable to happen if the room is poorly ventilated. A nurse should wear a gauze mask and be careful that the patient does not breathe in her face. Her hands should

be disinfected with a suitable disinfecting solution after waiting upon the patient. All dishes, utensils, towels, sheets and other articles used by the patient should be boiled or disinfected with a solution of bleaching powder (one-half tablespoonful of bleaching powder to a quart of water). Compound cresol solution should be used to disinfect the sputum.

The essential thing in the treatment of pneumonia is to see that the patient gets plenty of cold, fresh air. Oftentimes no other treatment is necessary. The bed should be placed upon a porch, or, if this is impossible, all the windows of the sick room should be wide open. The patient should be well covered, and hot water bottles or hot bricks should be placed near his feet to keep them warm, care being taken not to burn him. Once a

day the patient should be moved to a warm room and given a sponge bath. The pain in the side can be relieved by a mustard plaster. The bowels should be kept open by a small dose of salts. The patient's strength should be conserved by giving him a glass of milk or a bowl of soup every two hours during the day, and also at night when he is not sleeping. Solid food should not be given, as it will cause gas in the stomach, which may press against the heart and seriously interfere with its action. Milk is the best food, but sometimes it produces gas, in which case soups alone should be used.

The management of a case of pneumonia calls for the most skillful and conscientious nursing. Every case should, therefore, be under the care of a competent physician and should preferably have the assistance of a trained nurse.

THE GIVING SEASON.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

This is the time of the year when most of us believe in the teaching "that it is more blessed to give than to receive."

There is no denying the fact that there is a great deal of enjoyment in giving Christmas presents to those that are near and dear to us. There is also a great deal of pleasure in helping to provide some of the comforts of life for some needy family. Our experience convinces us that humanity on the whole is always ready to give, if such giving will make someone happy.

Our great difficulty, as a Health Department, is to keep many people from giving something away that will make its recipients not happy, but miserable. This is not only the season of giving presents to our friends, and assistance to those in want, but this is also the season of the year when dangerous contagious diseases are being given from one to another. When it comes to contagious diseases, it is not "more blessed to give than to receive," but it is apt to be more harmful to give a contagious disease to your friends or strangers than if

you never gave a present in your life. It is better not to give at all than to include contagious diseases in your giving.

If everyone would make as much of an effort to carry out the command of the Health Department, "Don't give," as they do the clergyman's "Do give," we would not have in Milwaukee, at the present time, about 200 cases of scarlet fever, 100 cases of diphtheria, and many other contagious diseases. Nearly all of the contagious diseases continue to exist because someone is more willing to jeopardize the health of other people than to submit to a few weeks of quarantine with a certain amount of inconvenience.

Many children are ill this very day with some contagious disease, where the parents refuse to call a physician or report the disease to the Health Department. They are invited to Christmas dinner at Brother John's or Sister May's and cannot take a chance of being quarantined at that time. It would also be too bad if their children couldn't see their brother's and sister's children Christmas day.

How long will it be before we can make people realize that it is more blessed not to give anything than to give everything, including contagious disease?

WE WANT TO BE YOUR SANTA CLAUS.

BY JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

They say that Santa Claus likes all good little children and that is why he will go out on the coldest and stormiest Christmas eve to bring them beautiful toys and useful presents.

Because Santa Claus likes children and is so good to them, they all like Santa Claus. There is no one liked better at this time of the year than Santa. Is it any wonder then that we want to be your Santa Claus? But we know that you don't want the Health Department to be your Santa Claus, because you don't like us well enough for that. You don't like us because you don't know and understand us. The same people who scare you by telling you that the doctor will cut your ears off if you aren't good will tell you that the Health Department will lock you up if you go

anywhere near it. Supposing we didn't lock you up or quarantine you when you have a catching sickness, what would happen to Santa Claus? He would go right into a house where there is scarlet fever, because there is no sign on the house. He would then either catch scarlet fever himself and probably die, or collect so many germs in his long whiskers that he would pass them from one home to another and in that way do much more harm than good. Where he sees a sign on the house he can simply leave the presents on the porch or in the hall and in that way save his own life as well as the lives of many children. So you see, little children, if it were not for us, Santa Claus would probably have died many years ago from scarlet fever or he would have

brought scarlet fever or diphtheria to so many homes that you would not want him to come to your home.

There are many other things we do that make you and your parents mad at us many times and yet which are for your own good. Santa doesn't always give you the things you ask for, does he? Neither do we. We give you what is most needed. We want to be your Santa Claus, but please don't write us letters asking for dolls, beds, go-carts, trains, airships, furs, mechanos, tinker toys, books and many other toys and useful things, because we carry a different line of goods entirely. Nearly everything we have is for children and is just what many of you need and yet we receive such few requests. Nothing would please us more than to receive letters like these:

To Santa of Milwaukee Health Department.

Dear Santa:—I am 9 years old, 50 inches tall and weigh only 46 pounds. Please come and examine me and see what ails me, because I am so thin.

RUTH.

To Santa Claus of Milwaukee Health Department.

Dear Santa:—My teeth are almost all worn out. This is only the second set of teeth I have worn out. Mamma says that if I just wait long enough, new teeth will come out by them-

selves, but I am tired of waiting, so please send me some for Christmas.

Please send me a tooth brush and powder, too, because our teacher said that a clean tooth won't rot. Yours,
SOPHIA.

To Santa Claus of Milwaukee Health Department.

Dear Santa:—My little brother snores so loud at night that he keeps me awake. The nurse who calls at our house says that he has the addennoise and I believe so, too, because he does make an awful noise.

Please send my little brother something for addennoise. Yours,
JOHN.

To Santa of the Milwaukee Health Department.

Dear Santa:—I am a girl of fourteen years. Ever since I can remember, I am sickly. I have a sore throat three or four times a year. Our family physician says that my tonsils cause all of my trouble. He says I ought to have them removed. The woman who washes for us says that it doesn't do any good to take out tonsils, because they grow again, anyway. Mamma doesn't know whom to believe.

I am so tired of being sick all the time and do hope that you will send me something for Christmas that will make me well. Your discouraged,
GENEVIEVE.

HEALTHGRAMS.

Carelessness with the hands and teeth causes more deaths in America every year than carelessness with motor vehicles, says the United States Public Health Service. Keep the hands clean, free from germs, away from the mouth and visit the dentist regularly.

Do not take drugs to cure the headache, says the United States Public Health Service. Consult a physician, a dentist or an oculist, to see if the cause can be located. Often the eyes, or the teeth may be at fault.

A BUREAU FOR VENEREAL DISEASES

By GEO. C. RUHLAND, M. D., Commissioner of Health.

Among the new services to be established in the Health Department for the coming years is that of a Bureau for Venereal Diseases.

Perhaps no activity of health departments is of greater importance than this new undertaking which proposes to deal with the problem of venereal diseases.

The venereal diseases—gonorrhoea, chancre and syphilis—constitute a trinity more destructive to the health and happiness of the individual, and indeed to the very existence of the race itself, than any other disease to which human flesh is heir.

If one contemplates that these diseases are responsible for 80% of all the blindness in the new-born, contribute about 75% of all the operations on the female generative organs, are the cause for a large portion of the sterility in both the male and female, furnish more than one-fourth of the inmates in insane asylums and are the cause otherwise for many diseases of the circulatory and nervous system, shortening life by nearly one-third, and causing an incalculable loss in efficiency and earning capacity, and that these are facts not just discovered but known for years and years—one must wonder why action has been so slow in coming.

The stand taken by the War Department, which considered the loss of efficiency to the Army from venereal diseases as a greater menace than the actual casualties of war, fortunately has brought about a

change of attitude of society towards the problem.

The government, realizing that the problem of venereal diseases is essentially one of civil life, has started a vigorous campaign against this national danger, and it is in conformity with this request that also the local Health Department has decided to enlarge upon its activities by establishing a Bureau of Venereal Diseases.

It will be the function of this Bureau, which has the endorsement of the medical profession through the County Medical Society, as well as the support of many other lay organizations in this city, to not only make diagnoses and furnish treatment to those who cannot afford to go to a private physician, but above all to act as an agency that will seek to lessen, if not eliminate, these diseases, by showing their danger, and by giving reliable and safe instruction on what constitutes a normal and healthful sex life.

The attitude of the past which left information on sex matters to the less desirable sources, has been too costly and damaging to the race. It must go, as well as the fallacy of sex necessity, double standards, and the terribly mistaken popular belief that venereal diseases are of little consequence. Venereal diseases are contagious diseases of more serious import than any of the rest of the contagious diseases.

The problem must be attacked frankly, courageously, yet tactfully and with much charity.

The Routine of School Inspection.

By PEARL L. VAN KERCKHOVE, R. N., Acting Field Supervisor.

Under the new rules laid down by the School Hygiene Division of the Health Department, a nurse examines one room a day in her class. When she has finished with the last room, she goes through the same routine, constantly being on the alert to detect anything that may be harmful to the children for whose welfare she is made responsible. Persistent cases of uncleanness and stubborn cases of skin infection are constantly being examined and advice given to the children and parents about treatment of same. Also many cases of peeling in light attacks of scarlet fever are detected. By culturing suspicious looking throats many diphtheria carriers are found, these cases are immediately excluded from school, thus helping to stamp out epidemics. At the same time physical defects are noted and referred to the medical inspector for thorough examination.

The nurse adheres to the following plan in routine inspection. She chooses a small room off from the main room to be examined. Here she sets her table, which may be a small table or a chair covered with paper napkins. She has in readiness tongue depressors, a box of toothpicks for examining the hair, a paper lined waste basket and a

writing pad to enter her various findings.

Before beginning the inspection, a little health talk is usually given the children, urging them to come to school with clean hands and faces, clean ears and finger nails and encouraging the use of a toothbrush. Then she asks them to roll their sleeves up and as they pass before her to open the mouth and pull down the lower eye lid. The children form in line, one row at a time and are admitted to the room one child at a time, so if anything is found a note may be tucked in the child's blouse to be taken home to "mother" and no one else need know about it. To the experienced worker a quick glance at the bared arms, the hair pushed gently aside with the toothpicks and an inspection of the throat reveals all she needs to know, the children are back in their places with almost no disturbance, and very rapidly, as a room of 40 children may be easily examined in 40 minutes.

Where there is a suspicion of contagion, the children are excluded for further inspection by the Contagious Disease Division. Instructions are sent home with the children for treatment of impetigo, pediculosis, and those not excluded told to report at a definite near date for reexamination.

A decayed tooth is far more dangerous to the health than a fly in the soup, says the United States Public Health Service. Visit the dentist regularly. Keep the teeth clean.

DIPHTHERIA CARRIERS.

By F. E. CHURCH, Bacteriologist.

One of the chief responsibilities of the Health Department is to preserve health, by preventing the spread of contagious disease. This cannot be done effectively and efficiently without the cooperation of the general public. A great part of the daily routine of the bacteriologist and his assistants is to answer whys and wherefores of bacteriological findings in diphtheria. In order that we may aid the public in a better understanding and interpretation of laboratory results, we deem it advisable to present here a few facts about "Diphtheria Carriers."

A diphtheria carrier is any one who harbors diphtheria germs in either nose or throat. The term is applied usually to those who are free from any acute clinical symptoms. Because of the absence of symptoms, the diphtheria carrier is a greater danger in a community than that case of diphtheria which has well defined clinical symptoms. The latter case is usually confined to the home and bed; the carrier, on the other hand, mingles freely with others.

It is a matter, therefore, not of sickness, but whether or not germs are found which will determine the department in establishing quarantine for diphtheria. Carriers will be kept under quarantine until there are at least two consecutive negative nose and throat cultures. Patients recovering from diphtheria may also become carriers. It is for this reason that no case of diphtheria will be released until

the department has at least two consecutive negative cultures from nose and throat. Cultures are also required from all those who have been in contact with the patient.

It is very important that in taking cultures, the culture or smear be properly taken. This means that the membrane, if there is one, be peeled up, or, better yet, that a piece of membrane be submitted for examination. The culture may also fail to give accurate findings when the smear is taken immediately after the application of some antiseptic to the throat. Again, a culture may fail to show up any growth because the smear is faultily applied to the culture media; or, a culture may miscarry because it was kept too long in a warm place before it is submitted to the laboratory. Membranes in the throat may, of course, be due also to other infections than diphtheria.

It is hoped that this brief discussion may make clear to the public the importance of cooperating with the Health Department in the control of diphtheria, by carefully observing the suggestions contained in this article. Every sore throat, no matter how light the symptoms, should be considered with suspicion, a physician should be called, and a culture submitted at once. Deaths from diphtheria should not occur if the case receives prompt attention. The Health Department not only makes the examination free of charge, but also will furnish the necessary antitoxin for these cases without cost.

PATENT MEDICINES

By JOHN P. KOEHLER, M. D., Deputy Commissioner.

We read in the papers from time to time that the reformers who helped to dethrone King Alcohol are making plans to attack Queen Nicotine.

No one can deny that nicotine is a harmful drug and individuals smoking excessively will absorb sufficient nicotine in time to disturb normal physiological action of their bodies. But why discriminate against nicotine? You will say, because it is so universally used in the form of tobacco. How about caffeine, a very powerful drug found in coffee? There are more coffee users than tobacco users. At least 50 per cent of our people are subject to some form of nervous disorder. Caffeine is a powerful nerve stimulant, and undoubtedly responsible for many nervous disorders. We are not writing, however, to defend smokers and condemn coffee drinkers. Our purpose is to be consistent and condemn the use of all drugs promiscuously.

Our experience has convinced us that too many people are over-drugging themselves. Babies scarcely have their eyes open when they are attacked at one end with Fennel Tea, Chamomile Tea, Anise Water and Castoria, and at the other with enemas and suppositories. These measure, to be sure, all appear quite harmless when we do not stop to consider how very sensitive the digestive tract of a baby is or when we do not realize that the very conditions which are causing the symptoms

which we are attempting to remedy, are made worse by our treatment. Teas may relieve flatulence temporarily in a baby, but will irritate the sensitive mucosa of the stomach to such an extent that its digestion will suffer, and its colic will appear more frequently. Laxatives may cause evacuation of the bowels, but will never cure constipation. They only make it worse by weakening the muscles of the intestines.

Parents not only dope their babies, but also practice on themselves. The patent medicine people also realize that most people are always more than ready to try every remedy that someone recommends, whether they need it or not, and that is why expensive patent medicine advertisements are placed in the daily newspapers.

People have so much confidence in drugs that they are not satisfied when they go to a physician unless he gives them some pills or a prescription for some. People hate to pay a physician for good medical advice. The writer spent one-half hour one evening in his office giving a young man such advice. When the young man was about to leave, he asked:

"Are there any charges?"

When assured that there were, he replied

"I thought that I didn't have to pay, because you didn't give me a prescription."

There are many people like this

young man who feel that when they go to a doctor, they go there for medicine, and feel disappointed if they don't get it. The doctors realize this attitude of their patients and many times prescribe drugs, not because the patients need them, but because they want them. If a doctor can cure you without drugs, pay him in addition to his regular fee, at least the amount

saved on the purchase of expensive drugs.

Before doping yourself with pain medicines or other unnecessary drugs, please remember that:

Some drugs do no good and all harm.

Some drugs do some good and some harm.

But no drug does all good and no harm.

SCHOOL HYGIENE NOTES.

Since so many schools are making such good records in our monthly health contest, it is impossible to award only a limited number of banners and be fair to all concerned. We have, therefore, decided to discontinue the monthly awarding of banners for the present.

Although the schools need not send in their monthly health reports in the future, we hope that none will on that account discontinue the monthly weighing of children.

The November reports show the following results:

Schools with lowest percentage of absentees:

St. Anns—4A, 4B, 7, 8 grades	0. %
Holy Angels—3, 4 grades.....	0. %
St. Josephats—3C, 4A, 5A grades	0. %
St. Johns Cathedral—5, 7, 8 grades	0. %
St. Anthony—2, 5, 6, 7, 8 grades	0. %
St. Marcus—Kg., 5, 6 grades	0. %
St. Boniface—6, 7, 8 grades..	0. %
St. Thomas—3, 8 grades.....	0. %
St. Cyril—8 grade.....	0. %

Schools with lowest percentage of absentees:

St. Anthony	1½ %
St. Anns.....	2½ %
St. Boniface	3½ %
St. Josephats	4½ %
St. Michaels.....	5½ %

Rooms with lowest percentage of defective teeth:

Bethlehem—1, 2 and 3, 4 and 5, 6, 7	0. %
St. Patricks—Boys 7 grade, 8 grade	0. %
St. Thomas—8 grade.....	0. %
St. Cyril—10 grade.....	0. %

Schools with lowest percentage of defective teeth:

St. Thomas	7 %
Zion Lutheran.....	10½ %
St. Patrick	13 %

Rooms with lowest percentage of children under weight:

St. Patrick—Boys 6 grade....	0. %
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Schools with lowest percentage of children under weight:

St. Anns	14½ %
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Special mention:

Cross Lutheran,	St. Stanislaus,
Bethesda	St. John Kanty,
Immanuel,	St. Marys Polish,
St. Michaels,	St. Leo's,
	Gesu.

We received a very interesting report from Mr. Stivers of the Detroit Street school.

Here are some of his figures. Please compare them with those of your school.

Number of children weighed.....	1,136
Number of boys of normal weight or above	274
Number of girls of normal weight or above	197
Number of boys below normal weight	285
Number of girls below normal weight	320
Number of boys 5 lbs. or more below normal weight.....	57
Number of girls 5 lbs. or more below normal weight.....	73
Number of boys 10 lbs. or more below normal weight.....	4
Number of girls 10 lbs. or more below normal weight.....	22

 FIRST AID TO THE INJURED **FROST BITES AND FREEZING.**

The exposure of the body to cold results in a varying degree of damage. The milder forms of freezing will leave the tissues of a dusky bluish-red color, cold to touch, and with a burning and tingling sensation, particularly when exposed to warmth. This degree of frost bite is commonly referred to as chilblains. Chilblains occur most commonly in those of enfeebled circulation, such as the very young and the aged. The extremities, such as hands and feet, are the most usual to suffer. In the severer forms of frost bite or freezing the tissues appear bloodless white, and are brittle. The victim frequently is not aware that freezing of part of the body has taken place. The exposed surfaces of the body, such as the ears, and tips of the nose, are naturally the most frequent to suffer in this way. Blister formation may also occur.

For the prevention of frost bites and freezing, proper protection by adequate clothing naturally suggests itself. Those of enfeebled circulation particularly should be carefully protected and should undergo such tonic treatment as is designed to enrich the blood and stimulate the circulation. Since freezing is much more likely to occur where the surface of the body is moist, it is better to wear cotton next to the skin and woolens over the cotton. The use of dusting

powder also is of value in preventing freezing, particularly on the feet.

In the treatment of frost bites or frozen tissue, it is essential that the thawing process be undertaken gradually, since the rapid return of blood to the affected part may cause rupture of the small blood vessel with consequent mortification and sloughing of the tissue. To this end it is best that the patient be brought in an unheated room and gradual thawing be encouraged by the application of snow or cold water, gradually raising the temperature of the water. As the circulation has been re-established, stimulating hot drinks, such as hot coffee, or tea, or beef tea, may be given to advantage.

Chilblains are best treated by gentle massage with some stimulating lotion, such as soap liniment or bay rum. The part should then be thoroughly dried and dusted with either borac acid powder, or some other powder, protected with cotton and bandaged. Where blisters have formed over the frozen tissue, these blisters should be punctured with a sterilized needle. The skin, however, should not be removed. The affected part may then be covered with some bland antiseptic ointment. Where necrosis, or mortification of the tissues, has taken place, the part should be dressed in an antiseptic drying powder and adequately protected, all dead tissues have been cast off.

MILWAUKEE HEALTH DEPARTMENT SERVICE DIRECTORY.

Sixth floor City Hall:

Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Eighth Floor:

Tuberculosis Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

SOUTH SIDE DISPENSARY, WOOLWORTH BLDG., 5TH AVE. AND MITCHELL ST.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY (MARQUETTE MEDICAL SCHOOL), 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 60.
Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.
Visiting Hours, 3 to 5 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.
Visiting Hours, Sunday, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.
Emergency Hospital.
South Side Contagious Disease Hospital.
Union Pharmacy, 1120 Walnut St.
Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HOW TO LIVE.

LESSON X.



THE DECALOGUE OF HEALTH.

Breathe deeply.

Drink five to six glasses of water daily.

Eat slowly and chew your food thoroughly.

Exercise daily and systematically.

Sleep eight hours out of twenty-four.

Have bowels move daily.

Stand erect, walk erect, sit erect.

Brush teeth mornings and at night.

Cultivate cheerfulness.

Practice moderation in all things.



Milwaukee Health Department.

COLDS!

TO PREVENT COLDS

Dress Warmly; Breathe Deeply.

Get Plenty of Fresh Air.

Eat Simple Food Moderately.

Keep the Bowels Open.

COLDS MAY LEAD TO

Grippe, Pneumonia and Consumption.

This is the Season for Colds.

Avoid Them.

(National Safety Council)

Milwaukee Health Department.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

JANUARY 1920.

Vol. 10, No. 1.



AY Health and Happiness

Be Yours

Throughout the Year.

—Milwaukee Health Department.

Bulletin of the Health Dept., JANUARY 1920

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

GEORGE E. ADAMS.....Vital Statistics
GEO. P. BARTH.....School Hygiene
H. H. BRYANT, D. V. S.....Food Hygiene
F. E. CHURCH.....Bacteriology
RUSSELL W. CUNLIFFE.....Chemistry

GEORGE R. ERNST, M. D.....Tuberculosis
C. L. KENNEY, M. D.....Contagious Diseases
E. T. LOBEDAN, M. D.....Child Welfare
AGNES J. MARTIN, R. N., Superv. of Nurses
T. F. THOMSON, M. D.....Sanitation

LAWS YOU OUGHT TO KNOW.

INFLUENZA (LA GRIPPE).

Every physician engaged to treat a case of influenza, or who shall have personal knowledge of any case of said disease, shall, within twenty-four hours thereafter, report the same in writing to the local health officer, giving full name, age and address of the patient. When a physician is not employed the responsible head of the family, or the owner, agent, manager, principal or superintendent of any public or private institution or dispensary, hotel, boarding or lodging house shall report the case to the local health officer. Cases of influenza should be reported to the health officer immediately by telephone.

All homes in which there is a case of influenza (la grippe) or pneumonia associated with influenza shall be placarded in a conspicuous place with a red card on which shall be printed the word "Influenza" at least two inches in height; all persons having such a disease shall be isolated in the home or hospital and no person shall be allowed to enter said home or the sick room at the hospital except the attending physician, nurse, members of the health board, and health officer, without the permission of the health officer or one

of his assistants.

All homes shall be placarded by or under the direction of the local health officer and said placard shall not be removed until at least four days after the temperature has registered normal in the last case occurring in such home.

All individuals in the home, except those who are engaged in gainful occupations, shall be prohibited from leaving the premises as long as the home remains placarded. Individuals in the home not afflicted with the disease who are engaged in gainful occupations may be permitted to follow such occupations on the condition that they do not frequent public meetings, churches, schools, theaters, pool rooms, billiard halls, saloons or any place where people from time to time congregate in considerable numbers. Teachers and such other persons with a gainful occupation or business who, in the opinion of the local board of health, may be dangerous factors in the spread of influenza on account of their association with large numbers of people shall, when influenza is present in the home, take up their residence in another home free from the disease or be quarantined.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

JANUARY 1920

NEW YEAR RESOLUTIONS.

BY GEORGE C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

It is an old-fashioned, time-honored custom to start the New Year with resolutions for betterment.

Some pledge themselves to moral uplift, some determine upon monetary gain, others upon social standing and public acclaim, yet others strive for favor and success elsewhere—in short, all the hopes and ambitions that ever have motivated human endeavor are again quickened in a thousand hearts by the magic of the New Year.

There are those who have an indulgent smile for New Year's resolutions, and others—we pity them—who shrug their shoulder with the cynical comment that New Year's resolutions are made only to be broken.

As for ourselves, we believe in New Year's resolutions, and we hope that everybody else might do so also.

Granted that most of these resolutions fall short of their original ambition, supposing that many of them fail utterly, are not even the few who are sustained by them during the year, sufficient success?

As for those who succeed but in part, and those who do not succeed

at all, is it not far better that they should have tried, though lost, than they should not have tried at all?

The next effort may bring success. Perhaps, indeed, it may be only at the hundredth trial—who knows. Perseverance brings success.

There is something splendid about a human soul that will not acknowledge defeat, but will rise and try again. If a resolution formed at the beginning of a New Year can give courage to try once more, who will say that it has not been worth while?

The Health Department starts out upon the New Year with the resolution to improve the city's health, to make it something better than it has been ever before, better than even last year's achievement, which so far stands as the best in the city's health record.

There are limits, however, in what the department can do for you. The public health is made up of individual health—your health. We need your help for a cleaner city, cleaner home, and, above all, for a cleaner personal life. We want you to include all this in your New Year's resolution for yourself, and live it.

“With malice toward none; with charity for all”--*Lincoln*

CHRISTMAS WITH THE POOR.

As seen by

HEALTH DEPT. NURSES.

December 24th was a lively day at the Chamber of Commerce! Perhaps you don't know what they wrote to Santa Claus this year and begged to be allowed to assist in making a Merry Christmas for some of Santa's boys and girls. You know the war being over every one is so happy and so anxious to give, it seemed for a time that the old Saint might be in danger of losing his job. But he was mighty nice about it and told them if they could assist in delivering the big baskets which they had planned, they might go ahead. He said he could get the toys around in the usual way, but Dancer and Prancer are getting a bit old and Mrs. Santa scolds if she sees them limping. She has been in favor of using an aeroplane this year anyway, she is very up to date you know, but she was told that the six reindeer have managed all these years and are good for many more.

He also suggested to the Chamber of Commerce that the Health Department nurses would be good assistants as they know and love all the Milwaukee boys and girls anyway. So the nurses and other helpers met at the Chamber of Commerce bright and early. There they found huge piles of food which were quickly placed into 110 baskets. The baskets contained chickens, bread, potatoes, butterine, cookies, corn, peas, celery, candy, nuts, all the goodies for a Merry Xmas dinner. Each nurse took charge of as many

baskets as her conveyance could accommodate, and these were many and varied: trucks, Packards, Fords were there all eager to help.

It was loads of fun and it was most pathetic to take dinners to kiddies who otherwise would have had possibly only a bite of bread and a cup of coffee.

Many of the little folks thought Santa himself was there and cries of "There's Santa! that's our nurse with him! There he is! That's him!" greeted the cars at every turn.

Two wee lads were sadly discussing the probability of no dinner as a big Packard rolled up. "There's our nurse! What's she got? Gee look! It's a big basket! It's for us!" "No! it's for us, cuz our pa's sick." "Hello Sandy Claus—aint that for us?" It was. The father had been at Muirdale Sanitarium fighting for health for some months and this same nurse has been a staunch friend of the family during the weary months of waiting. Another place a little chap about eight was all alone in a dark basement crying because grandmother was away working and he saw no hope for a Xmas dinner. How his eyes sparkled when the nurse entered! The tears were all gone when she left, a rosy cheeked apple was clutched fast in one grimy little hand, while he solemnly promised "not to eat no more till grandma came back!"

In some of the homes the people were surprised speechless, in most

cases there was no evidence of holiday preparation. In one or two places a man was making ineffectual efforts to brighten up the home a bit for his motherless little ones. Mothers who have been left alone with a hungry little brood wept with joy as the baskets appeared and one dear old soul exclaimed, "I cannot thank you enough for such a kind of a heart like you've got!"

While these nurses were busy, several others were going about with women who wanted to make some child happy on Xmas day. Eighty stockings filled with nuts, candy, apples, and toys were delivered by

one who has no babies of her own, and she was made happy by hearing a youngster exclaim "Oh here's Mrs. Santa Claus." One nurse spent the afternoon guiding six sleds packed with goodies by more fortunate children, to their little playmates.

Another tramped along alone, weary but happy with arms loaded with toys to little friends she had learned to love in the Community work.

I am sure each nurse in the Health Department as they finished their day felt if they did not say, "Truly it is more blessed to give than to receive."

BRONCHO-PNEUMONIA.

UNITED STATES PUBLIC HEALTH SERVICE.

This is a disease that occurs particularly in young children, following frequently upon measles, whooping cough, and the ordinary common colds.

The symptoms are similar to those of a severe bronchitis, and consist of a loud, harsh cough, accompanied by pain, shortness of breath, and fever. The cough is attended with a glairy and tenacious expectoration, which may be blood tinged. The temperature may rise as high as 104° or 105° F. The shortness of breath is very distressing, the respirations sometimes amount to as high as 60 or 80 per minute. The pulse is frequent and may be rapid, feeble and irregular. Recovery may occur within a few days or may be delayed for several weeks.

The patient should be kept in a well ventilated room kept at a temperature of about 70° F. The air

should be kept moist by placing dishes of water on register or radiator or by means of a croup kettle. The bowels should be kept open by the use of small doses of salts or other means. The management of the case should be in the hands of a competent physician. Care should be taken to boil all sheets, pillow cases, and other articles which come immediately in contact with the patient. Separate dishes should be used and they should be scalded with hot water after being in the sick room. The secretions and expectorations from the child's mouth should be carefully collected in tissue paper, or pieces of cloth, and burned immediately. The diet must be light yet nutritious, and the patient must not be permitted to leave the bed or the house until pronounced fully recovered by the attending physician.

FAMILY TREATMENT.

BY JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

The theologist, the economist and the sociologist all agree that the family is the most important factor in our modern civilization. Nearly all of our ideals are dependent upon the family for a realization. All of us will readily agree therefore that everything possible should be done to keep the family intact.

Although social workers have for years agreed that the family should be the unit to work on, instead of individual members, nevertheless very little has been done to make it possible to treat the entire family.

There are many institutions to take care of almost any ailment of the individual members of the family. There is a hospital for the baby who is not gaining, because it is not receiving proper food and sufficient amount of fresh air. There is an older child that is very anaemic and under-nourished, that is sent to an institution for under-nourished children. There may be other members of the same family sent to other institutions and in nearly every instance the reason given is, "Home conditions are very bad."

Does it seem possible that we are hoping to improve the bad home conditions by sending individual members to institutions? Individual members may be improved at institutions, but home conditions will remain the same unless something is done for the entire family. As long as home conditions are not improved, we will find that the work done by institutions will be only

temporary, because when the improved members return home, they will soon suffer again from bad surroundings. Instead of treating results of a poor home, we must go in and remove the cause of these bad results and in that way only obtain permanent results. Not only is the treatment of families more permanent but also more economical. We will many times take two members out of one family to an institution, where the cost of maintenance is \$1.50 per day per patient, or \$3.00 per day for the two individuals. We think nothing of spending \$90.00 a month on two members of a family in our institutions, but oppose anything that might make it unnecessary to break up the family, by spending \$10. or \$15. a month on the entire family. Many times a great deal of time and money is spent on a family without any results because they live in such dirty and degrading shacks that no influence for good from without can have any results. When we find a sick man requiring an operation, we rush him to a hospital whether he has money or not, and make no attempt to operate in his home. When we find a sick family due to poor surroundings, we must not attempt to cure it in its old surroundings, but must rush it to a different home where the surroundings are more conducive to health.

We have county and city hospitals for sick individuals, why not have county and city institutions for sick

families? These institutions for families might either be large apartment buildings or made up of many cottages. If individuals can be made to observe the rules and regulations of an institution there is no good reason why families cannot be made to do so. Some of these families might be cured in six months; others it might take a year to Americanize, "sanitanize" and "ambitionize". Real estate men would soon realize that the demand for homes would soon be stimulated by having the city or county furnish poor families with sanitary homes and in that way educate them to de-

mand better living quarters.

If the city or county built \$5000. cottages for its indigent families, and charged itself 5% on its investment and \$50. a year for upkeep, it would mean an expenditure of \$300. a year per family. This is much cheaper than any one individual can be taken care of at any of our city or county institutions.

Since there doesn't seem to be any reason why families should be broken up and many reasons why families should be kept intact, why not give more family treatment in the future, by providing family institutions?

WOOD ALCOHOL.

Owing to the heavy increase recently noted in the number of deaths and cases of blindness resulting from the drinking of wood alcohol by those ignorant of its dangers, the National Committees for the Prevention of Blindness, 130 East Twenty-second Street, New York, is sending broadcast special warnings of the tragic consequences which may follow the use of wood alcohol, denatured alcohol and medicated alcohol for beverage purposes.

Occasional cases of this nature have been occurring from time to time for many years, but since National prohibition went into effect, there has been an alarming increase in all sections of the country due to the preparations of drinks in which wood alcohol has been used or in some cases where it has been taken straight.

The harmful action of this poison comes not only from taking it internally, but may likewise be induced by breathing its fumes, and by absorption through the mucous mem-

branes of the body. Its effect is usually noticeable very shortly after exposure. Within a few hours after drinking, acute headache is noted, usually accompanied by violent attacks of vomiting, body pains, extending over the region of the kidneys, and excessive dizziness. Vision may become impaired, total blindness occur, and death itself result.

The wood alcohol used in the United States is obtained chiefly from the destructive distillation of wood—hard wood, birch, beech, maple, oak, elm and alder being those most frequently used. The chief uses to which it is put are for the denaturing of grain alcohol; for various purposes in lines of common manufacture (especially as a solvent in the preparation of shellac, varnish, dyes, etc.); as an ingredient in medical and pharmaceutical preparations; in the chemical industries and as a fuel and illuminant.

Only within recent years has wood alcohol become so dangerous to life and sight. Formerly it was a dark,

bad-smelling, bad-tasting fluid which no one was tempted to drink. Later, a process was developed by which this color, smell and taste are removed. Wood alcohol, when purified in this way, looks, smells and tastes like grain alcohol, and may thus be easily substituted for it by unscrupulous persons.

Denatured alcohol usually consists of ninety per cent. grain alcohol and ten per cent. wood alcohol, thus rendering it unfit for drinking. It is being increasingly substituted for wood alcohol in many industrial uses, to eliminate the great dangers attendant upon the use of the latter.

Pharmacists who hold permit and have given bond are allowed to medicate alcohol and sell it for non-beverage purposes in quantities not exceeding one pint, provided they first medicate it in accordance with any of the nine formulas specified by the Commissioner of Internal Revenue, U. S. Treasury Department. Carbolic acid, formaldehyde and bichloride of mercury are the chief of these denaturing agents. The container of such medicated alcohol

must bear a "Poison" label. The sale by pharmacists of medicated alcohol for industrial purposes is prohibited. It is sold chiefly for rubbing purposes.

In spite of these regulations and precautions some persons are using these poisons for drinking purposes, even at times completely disregarding the "Poison" label which may have appeared on the bottle. In other instances, the victims have been ignorant of the dangers of that which they were using—the beverage having been prepared by others and sold under false pretenses or under some misleading name.

In treating a case of wood alcohol poisoning, the stomach should be emptied promptly by means of a stomach pump or an emetic, such as mustard (a tablespoonful to a glass of tepid water). The patient should then be given hot coffee as a stimulant. Frequent draughts of a solution of baking soda, a quarter teaspoonful to a glass of warm water, is also useful. The further care of the case should be in the hands of a physician.—Exchange.

MUSTARD AS A REMEDY.

Mustard is successfully used externally to draw blood to the surface in case of pain, where the skin is not broken. It should be employed as a plaster or poultice made as follows: One part of ground mustard thoroughly mixed with from two to four parts of flour and made into a paste by the addition of a small quantity of tepid water. This is then spread thinly to within one or two inches of the border of the cloth prepared by folding in two or three layers of old cotton cloth. The

amount of mustard depends upon the degree of pain, the age of the patient, etc. Care should be taken that the mustard does not blister the skin. An application lasting from twenty minutes to half an hour or until redness of the skin is sufficient, ordinarily. As a rule, mustard plasters or poultices should not be applied to children and old people, as they may blister the surface.

Given internally, mustard is used to produce vomiting, by stirring a tablespoonful to a cream with a cupful of tepid water.

GAS POISONING.

United States Public Health Service.

By far the greater number of cases of suffocation due to gas in this country are caused by illuminating gas. Many persons use this method of committing suicide.

A gas burner should never be turned down low and allowed to burn all night in a room in which persons are sleeping, as the flame may be extinguished by a change in pressure or a slight draft and later the room become filled with gas. When going into burning buildings which are filled with smoke it is well to tie a cloth wet with water around the nose and mouth. As the air is generally purer near the floor than at the ceiling, the person should, if necessary, walk on the hands and knees or crawl on the floor. In entering a room or other place which is full of gas to remove a suffocated person, take several deep breaths of pure air outside and spend as brief a time in the compartment as possible.

Preliminary signs of illuminating-gas suffocation are headache, dizziness, nausea, feeling of sleepiness and laugour, and a rapid pulse. In later stages when unconsciousness comes on, the face and hands are blue, heart action is very rapid and weak, and breathing may be shallow or entirely suspended.

The patient should always be immediately removed to where the air is fresh and good. If he is only slightly affected, walk him up and

down in the open air and give some effervescing drink, such as soda water, Weiss beer, or a teaspoonful of baking soda in a glass of water. This will cause belching of the gas and relief from nausea.

In more severe cases, when the patient is more or less unconscious but still breathing, sprinkle a few drops of ammonia water on a handkerchief and allow the patient to take one breath with this under his nose, once a minute. Rub the arms and legs briskly toward the heart to promote the circulation. If the patient is conscious enough to swallow, give one-half teaspoonful of aromatic spirit of ammonia in half a glass of water.

If breathing has ceased, begin artificial respiration at once, after loosening the collar or any tight clothing around the neck and chest. Have an assistant give whiffs of ammonia, as described above, and also rub the extremities toward the heart; but do not let these procedures interfere with the artificial respiration, which must be continued without interruption until the patient begins to breathe of his own accord in a regular manner.

The after treatment is rest in bed with appropriate stimulation. In severe cases the patient should be kept in bed until he has fully recovered, as dangerous symptoms have followed getting up too early.

GIVE THE INFANT OF THE UNMARRIED MOTHER AN OPPORTUNITY TO LIVE AND BE STRONG.

By MISS LOUISE DRURY, Juvenile Protective Association.

Federal statistics tell us that 50% more deaths occur among infants of illegitimate birth than among those of legitimate birth. Why? Do we always remember that every infant regardless of social status needs the same kind of feeding, care and protection in order to live and develop properly? The prenatal, confinement, and postnatal care of unmarried mothers and the feeding and care of their infants are public health and child welfare problems. They are not moral problems when it comes to the life and health of the mothers and infants. Public health is the vital concern of every citizen, physician, nurse, or institution.

No progress was made in stamping out tuberculosis or venereal disease until the public woke up to the fact that they were public health problems. The Health Department of Milwaukee believes that infants' care, the saving of the lives and health of its future citizens, regardless of their social status, is a public health problem. Federal statistics tell us that $2\frac{1}{2}$ times as many deaths occur among the artificially fed babies as among the breast fed babies. The Health Department, therefore, is urging physicians, institutions, and individuals caring for infants to see to it that every infant is breast fed for at least three months, whenever it is physically possible. The Juvenile Protective Association is co-operating with the

Health Department by advising and providing for mothers and nursing babies. Every baby should be guaranteed natural feeding regardless of whether its mother is a private pay patient or free patient.

Too long have we listened to the wishes of relatives. The time has come to give first consideration to the needs of the baby. The argument is often used that many homes wish to have a tiny baby for adoption. Experience has shown that fully as good and often better foster homes are open to babies when they are three months old and have been breast fed and are in good condition, as are open to the few days old baby. The right kind of a mother is not only ready but glad to give the nursing care to her baby when she realizes that it is the one thing which she can do for the baby which she has illegitimately brought into the world. The more the mother loves her baby, the more she wants to do that much for it, even though she must eventually give it up for adoption.

Provision is made by the Juvenile Protective Association to place mothers with nursing babies either in homes where the mothers are paid wages, work for their board, or pay their board. An effort is made whenever possible to have the father of the baby pay for the care of the child. The Juvenile Protective Association stands ready to be of service

at any time in persuading mothers to do what is right for their babies, and to make the provision to accomplish this. The time has come in dealing with these mothers and babies to forget the moral situation

responsible for the birth of the child, and to concentrate attention on the big public health and child welfare problem involved, thus working together to save the lives and health of these unfortunate children.

PATENT MEDICINES

By JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

In one of our late evening papers the following advertisement came to my notice:

"Just Tell Them to Call on Us"—
"H. is Anxious to Tell Others what
Tanlac Did for His Wife."

"For a great many years my wife has been bothered with stomach trouble and in spite of all the medicines and treatments she has taken her health has been giving way year by year. As to appetite, she had none at all practically, and whenever she would eat a little of something it wouldn't digest and she would complain of a distressing feeling afterwards. Gas formed and pressed up around her heart and gave her terrible pains in the chest and her breath would be cut off so bad that she would almost choke. My wife had such awful dizzy spells that she could hardly stand up and sometimes she would go to bed with a headache, couldn't sleep for it and when she got up her head would still ache. She had pains across her shoulder blades, and she fell off in weight until she was almost a shadow and had so little strength that if she started to do the housework she would give out completely.

"Well, sir, she has taken three bottles of Tanlac and all symptoms

of her troubles have disappeared entirely and she doesn't look like the same woman. Her appetite is fine now and she is not troubled any more with indigestion or gas and her breathing is free and regular. The pains over her kidneys and in her back have left her completely and headaches and dizzy spells are all a thing of the past. She is gaining in weight and strength right along, can do her housework with ease and is in as fine health as any woman of her age—sixty-eight years old. I would not be without Tanlac for any amount of money and it always is a pleasure to me to get a chance to speak a good word for such a remarkable medicine."

Since the advertisement invited all who disbelieved to call, the writer accepted the invitation and called at the home of Mr. H. December 26th. I told Mr. and Mrs. H. and their daughter who I was and what I came for. I received a very cordial reception and immediately realized that these people were nice enough to make it safe for the publicity man for Tanlac to have them say almost anything he wished in his "ad" without being in danger of having to retract it.

"I never had all of those things

that were in the paper", said Mrs. H.

"I never said all of that stuff which that fellow put in the advertisement", said Mr. H.

"We never knew that he was going to put anything in the paper. He didn't tell us that he was", said the daughter.

Mrs. H. said that she was taking Tanlac because the doctors told her that she had cancer and could do nothing for her. For a while she went to a chiropractor who charged her one dollar a treatment, but she decided that Tanlac at one dollar a bottle helped her as much as the chiropractor, so she quit the chiropractor in favor of Tanlac.

Mrs. H. is a very sick looking woman and, no doubt, is willing to try Tanlac or anything else that promises her any relief. She is gradually losing strength and weight.—Is unable to do her housework, but lives with her married daughter who does the housework.

If the statement in the Tanlac ad-

vertisement that she doesn't look like the same woman since taking three bottles of Tanlac is true, it is because she looks so much worse now than she used to, instead of better. Mrs. H. does say that Tanlac seems to stop the formation of gas on her stomach, which no doubt is possible, because the alcohol in Tanlac acts as a preservative on the stomach contents and in that way retards fermentation.

No doubt, this faked testimonial will be used in many papers all over the country by the Tanlac people, to fool the unsuspecting public. The profiteer isn't in it with the patent medicine man, who shares his big profits with the newspapers who assist him in deceiving the sick and helpless.

The newspapers ask our advice on a great many health problems, but never ask us to censor their medical drug advertisements. We would be more than glad to do so, even if we had to work on Sundays.



FIRST AID TO THE INJURED



Convulsions.

Convulsions are a symptom of many diseases. They commonly occur in children after eating indigestible food, and at the beginning of any serious disease. Any child subject to convulsions should, therefore, be carefully examined by a physician.

If a child has a convulsion, it should be put in a lukewarm bath. Cold compresses may at the same time be applied to its head. A mustard plaster may be applied to the

back of the neck, being careful to leave it on only long enough to red-den the skin. The bowels should be emptied promptly by the use of a soap-suds enema.

Earache.

Children with enlarged tonsils and adenoids are especially prone to develop earache. The common cold, measles, scarlet fever and many of the other acute infectious diseases of childhood may be the beginning of middle ear infec-

tion. The pain usually is very severe, and the patient also complains of fullness in the ears, dizziness and deafness. A baby or child will often pull at its ear as if it felt some obstruction in the ear canal. Whenever a baby appears sick and the cause has not been ascertained, it is well to think of earache. Touching or gently pulling on the ear makes the baby cry out with pain. On account of the warmth, it usually prefers to lie with the affected ear against the pillow. There is generally a rise of temperature, but this is not always the case. The pain is relieved when the ear drum ruptures and there is a discharge of serum and pus from the ear canal.

Because an inflammation of the middle ear may lead to serious complications, or may lead to deafness, earache should always receive prompt attention at the hands of a competent specialist. Pending the coming of a physician the pain may be relieved by means of a hot water bottle, wrapped in a towel, or by hot cloths. The application should be continued for half an hour and should be renewed every two hours. During the intervals between the application of heat the ear should be kept warm.

Croup.

There are two kinds of croup—true croup, which is the same as diphtheria, and false croup, which is a nervous affection and occurs in spasms, usually at night.

For the prevention for attacks of false croup, local applications of ice water or a cold compress will often serve well. A mild mustard plaster applied to the throat and chest may act in the same way. If a child is

especially subject to this condition, it is sometimes best to use steam from the so-called "croup kettle". This is arranged by covering the top of the bed with sheets which should be raised some distance above the child's head. The steam from the kettle, heated by alcohol, is then conveyed into this space. The steam keeps the air moist and prevents the spasm. Care should be taken the next day to see that the child does not go out of doors and is not exposed to drafts, in order that he may be prevented from catching colds.

The attack of croup is preceded by hoarseness and a loud, rough cough, which from its peculiar sound has been called a "croupy" cough. The attack comes on usually about midnight. The child is awakened from sound sleep by coughing and violent efforts to get its breath. The face becomes blue and presents an anxious expression. The symptoms usually cease abruptly in an hour or two, and the child resumes its slumber. The attack may be repeated on subsequent nights.

Simple means often have a wonderful effect in relieving the spasm. Sometimes passing the finger down the throat will have this effect. A warm bath may break up an attack. The best method, however, is to give a teaspoonful of tincture of ipecac, followed by a little milk. This causes vomiting and relieves the condition.—Exchange.

This is the scarlet fever season, warns the United States Public Health Service. A clean, sanitary mouth will help to prevent it. Compel the children to brush their teeth regularly and keep the mouth clean.

MILWAUKEE HEALTH DEPARTMENT SERVICE DIRECTORY.

Sixth floor City Hall:
Executive or General Offices.
Child Welfare Division.
Vital Statistics Division.
Sanitary Inspection Division.
Food Inspection Division.

Eighth Floor:
Tuberculosis Division.
Communicable Disease Division.
Medical School Inspection Division.
Bacteriological Laboratory.
Chemical Laboratory.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

SOUTH SIDE DISPENSARY, WOOLWORTH BLDG., 5TH AVE. AND MITCHELL ST.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY (MARQUETTE MEDICAL SCHOOL), 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 60.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

GREENFIELD PREVENTORIUM FOR CHILDREN.

Telephone, Wauwatosa 181.

Visiting Hours, Sunday, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid bacterine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HEALTH BRIEFS.

The Health Department budget for 1920 provides \$1.00 per capita for health; last year's appropriation was 69c.

Milwaukee's mortality rate of 11.02 per thousand for the year 1919 is the best in the history of the city, and places Milwaukee in the foremost rank of American cities having a low mortality rate.

The mortality of children under five years of age was reduced by 30% during 1919 — the actual number of children saved being 570.

For the year 1919, the number of deaths of babies under one year was 966 as against 1,223 deaths in 1918. This gives us a rate of 97 deaths per thousand births for 1919, as against 108 deaths per thousand births in 1918.

Deaths from diphtheria were reduced in 1919 from 11.86 to 9.59 per hundred.

Nearly 15,000 vaccinations were undertaken by the Health Department last year.

Health supervision of all children at school, both public as well as parochial, high schools, as well as continuation schools, is now under the single authority of the Health Department. There are 93,000 children in these schools. With the nurses transferred from the School Board, and the new nurses allowed by Council action, the Health Department will have a total of sixty nurses, or one nurse for each 1,500 children of school age.

Through the assistance of the Red Cross, the Health Department has been enabled to place a scale in every one of the schools in the city.

About 20% of the children at school have been found to be 10% or more underweight. These children will be placed into special nutritional classes, and furnished milk and crackers twice daily. The home conditions will in addition thereto be investigated for such improvements as may be necessary.

The Bureau of Food Inspection has been enlarged by the addition of five inspectors. All meat not government inspected must hereafter be inspected, stamped, and tagged by the Health Department before it may be sold.

A Division for Venereal Diseases has been included in the activities of the Health Department for 1920, with a budget appropriation of \$10,300.00. The service will include both educational work as well as dispensary treatment.

A COVENANT

W. A. Evans, M. D.



I pledge myself to so live that I may be well, and to this end I agree to abide by these, My Laws:

I accept the stewardship of my body, promising not to violate the rights thereof by acts of omission or commission.

I will allot a portion of each day for work, another portion for play, and another portion for rest, and I will give to each appropriate energy and thoughtfulness.

I will develop for myself those habits which make for health, eschewing all those habits and contending against all those customs which harm me and my race.

I will avoid all poisons of whatsoever kind.

I will do unto others as I would have others do unto me.
I will not expose others to contagion borne by me, and I would have them in a like manner protect me.

I will respect the rights of others to have sunlight, clean air, clean water, and healthful food.

I will eat as my work demands, and will not overeat in response to appetite or whim.

I will make use of my muscles in work or play during some part of each day.

I will devote to sleep, not only the required hours, but keep my mind in that state of quiet calm which is necessary for recuperation and rest.

I will not worry. Whatever fortune may bring me I will accept with calmness, preserving my equanimity alike in seasons of adversity and of plenty.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

FEBRUARY 1920.

Vol. 10, No. 2.



IFTEEN YEARS could be added to the average length of life if what is known about right living to-day could become the knowledge of all.

Bulletin of the Health Dept., FEBRUARY 1920

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

GEORGE E. ADAMS.....Vital Statistics
GEO. P. BARTH.....School Hygiene
F. E. CHURCH.....Bacteriology
RUSSELL W. CUNLIFFE.....Chemistry
GEORGE R. ERNST, M. D.....Tuberculosis
C. J. KENNEY, M. D.....Contagious Diseases

E. T. LOBEDAN, M. D.....Child Welfare
AGNES J. MARTIN, R. N., Superv. of Nurses
WM. J. McKILLIP, M. D., Venereal Disease
STANLEY L. PILGRIM, M. D. C.,
.....Food Hygiene
T. F. THOMSON, M. D.....Sanitation

LAWS YOU OUGHT TO KNOW.

DIPHTHERIA OR MEMBRANEOUS CROUP.

Patient.

1. Quarantine for patient until two negative cultures, taken not less than twenty-four hours apart, show the absence of diphtheria bacilli, and disinfection of person, clothing and premises.

Contacts.

2. Persons exposed to or in the family with the patient must be quarantined. All persons (children and adults) exposed to or in the family with the patient cannot be released from quarantine until a culture obtained from both the nose and throat shows the absence of diphtheria bacilli and after disinfection of person and clothing.

3. Children remaining in the home with a patient under quarantine cannot return to school until five days after one negative culture has been obtained from both the nose and throat and the quarantine removed from the home; such culture to be taken at the time the release cultures are taken from the patient.

4. Children exposed to or in the family with the patient may return to school providing one negative culture has been obtained from both the

nose and throat and they have taken up their residence elsewhere for five days.

5. Contacts not in the family with the patient may return to school after one negative culture has been obtained from both the nose and throat.

Carriers.

6. By the term "carriers" is meant all individuals from whom a throat culture or a nose culture shows the presence of diphtheria bacilli when no clinical symptoms of the disease are present. All carriers must remain under quarantine until two successive cultures taken not less than twenty-four hours apart show the absence of diphtheria bacilli and after disinfection of person, clothing and premises.

For chronic carriers (persons who harbor diphtheria bacilli in the nose and throat for a period longer than six weeks) special arrangements for isolation may be made with the State Health Officer.

7. All cultures taken for the release of cases of diphtheria or diphtheria carriers shall be taken by a representative of the local board of health.

INFLUENZA-PNEUMONIA.

By GEO. C. RUHLAND, M. D., Commissioner of Health.

At the present writing it appears that the outbreak of influenza-pneumonia, which made its reappearance along about the middle of last January, has about spent itself.

As was anticipated, the number of cases involved in this outbreak was much smaller than in the outbreak of 1918, a total of 2,533 only having been reported within the four weeks' duration of the outbreak. This smaller number of cases may be accounted for by the fact that the epidemic of 1918, involving as it did large numbers of people, fortunately to a considerable degree conferred immunity where it did not kill.

Nevertheless, among those who escaped that earlier epidemic, but who fell victims to the present outbreak, a mortality rate of approximately the same severity as that which characterized the 1918 epidemic, was unfortunately observed. Whether this mortality may be accepted fully as an expression of the virulence of influenza-pneumonia itself, or whether it must be regarded as influenced by the higher pneumonia death rate always common at this time of the year, is a question the answer to which is not so readily given.

Unfortunate as this recurrent influenza-pneumonia outbreak has been, it has been, nevertheless, of some value in so much as it has served to add to our experience, and has made us more competent to deal with a like situation.

The chief lesson that apparently is being taken from these outbreaks of

influenza is, that the public is awakening to a realization of the importance of giving prompt and better attention to the ordinary cold.

The ordinary cold is always with us during the winter months. In fact, because it is so common, it has in the past not received the attention it should have received. Colds are contagious. The ordinary cold perhaps is among the most contagious of communicable diseases. The ordinary cold also, in the largest number of cases, is the beginning of pneumonia. Pneumonia, unfortunately, always has held here, as elsewhere, first place as a killing disease. It is of greatest importance, therefore, that the public should be thoroughly impressed with the relation of the ordinary cold to pneumonia.

If we hope to modify the annual large number of deaths that occur from pneumonia, we must begin by giving the common cold greater consideration. An ounce of prevention here is worth, indeed, many pounds of cure. The ordinary cold, if given prompt attention by going to bed and placing oneself under the care of a competent physician, will usually clear within a few days. Neglected and uncared for, it may develop not only into pneumonia that may take the patient's life, but also at best may continue for weeks, greatly reducing the working efficiency of the victim, laying the foundation for future trouble and in the meantime becoming a source of infection to a great many others for whom the consequences may be of much greater seriousness.

MORE NURSES.

By STELLA L. MATHEWS, Registrar, Milwaukee Nurses Directory.

During the recent epidemic, which has been with us for the past few weeks, an indelible impression has been made of the necessity of practical assistance in homes where nearly every member of the family was in bed with a mild type of infection. Scores of families who cannot get anyone to come in and help frantically telephone for a trained nurse.

The requests frequently come like this: "Have you a trained nurse"? Your reply is generally "no". "No practical nurse either, or any old woman who will come in and help"? Again the reply is "no", but you inquire into the nature of the illness in order to send the nurse best fitted for that type of sickness, should one come in. You find there is no one critically ill, but the whole family slightly so and some one is needed who can do the cooking and housework. You try to explain that nurses are so much needed where illness is critical that, even were they available, you would not be justified in sending them out for that type of work. The answer frequently comes "Money is no object. We will pay anything. Fifty dollars a week if the nurse will only come." Your explanation has not been sufficient and again you try to explain that it is not money, but the type of worker required which you are unable to obtain. A worker who can go into the home and keep the household machinery running until the mother is again about and able to resume her duties. The services of a visiting nurse for two hours a day would

give all the skilled nursing necessary.

Looked at from an economic point of view sending a nurse for that type of work would be the height of extravagance. A nurse is trained to give expert care where expert care means the saving of a life; for instance it is good nursing which helps to save pneumonia cases; also skilled nursing which saves malnutrition babies, acute medical cases, serious operative cases and complicated obstetrical cases. The nurse is taught the necessity of observing symptoms and the intelligent recording of the same. This often gives the physician the knowledge needed to change his system of treatment and so avoid a critical termination of a case.

It has taken the nurse three years to obtain the knowledge which makes her a real factor in the betterment of public health. Would it be social economy to send her out to do two hours' nursing per day with twelve hours' housework, even for fifty dollars per week?

Is there no solution for this problem? Would not a group of women, trained for this particular work, assured of a good salary, and working in conjunction with the public health nurses, be one solution? Another might be to have nurses released from cases no longer critically ill, sent to other critically ill cases or to do hourly nursing where only a limited amount of skilled nursing is required. Who shall judge?

The nurses are as anxious for a solution of this problem as is the public. Tell us how to help.

DON'T LET THEM WORRY YOU!

By JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

It is an old saying that worry kills more people than work. This is more true to-day than ever. The tendency of to-day is to worry a great deal and work little.

If you want to lose weight, worry!

If you want to ruin your digestion, worry!

If you want to dull your mind, worry!

If you want your hair to turn gray, worry!

If you want to lower your vitality and resistance against disease, worry!

I don't know of anything more detrimental to the health of individuals than that deadly word, worry. The tendency of the daily press of to-day is to worry people as much as possible. Influenza epidemics are predicted from time to time, and when they finally do arrive, the death rate is exaggerated in spite of the Health Department's assurance that the epidemic is not so severe.

Just about the time that people have stopped worrying about the shortage of coal, a big coal strike or

During the last twenty years it has been possible to reduce the general death rate in the United States from 17.6 to 14.2. This represents a truly enormous saving of life. Had the conditions of twenty years ago prevailed during the year just

railroad strike is predicted and the worriers that have money immediately attempt to relieve their worries by putting in a big supply of coal. This, of course, increases the demand for coal and the coal dealer needs no longer to worry. When the demand for flour, sugar, eggs, butter, potatoes, and other necessities of life decreases, and prices threaten to come down, it is time to worry the people by telling them that if there is a railroad strike the present supply of food on hand will soon be exhausted and the worriers who have money can begin hoarding again, the monopolists of food can stop worrying and the poor people can worry themselves sick.

Don't worry any more.—Take the attitude of the colored gentleman who sings "I am a-livin' anyhow, until I die."

Don't worry about dying, because worrying will only hasten death.

Don't worry about starving, because the Milwaukee Health Department will see to it that no one will starve in Milwaukee.

passed some 350,000 more persons would have died than actually did die. By dissemination of health educational matter the newspapers must be given credit for every materially helping in this substantial achievement.

Thousands of children are killed every year because parents say, "They will have it anyway", and permit the littles ones to expose themselves to whooping cough, measles and scarlet fever, says the United States Public Health Service.

CONSTIPATION.

FROM "HOW TO LIVE."

The injury which comes from the retention of the body's waste products is of the greatest importance. The intestinal contents become dangerous by being too long retained, as putrefying fecal matter contains poisons which are harmful to the body. Abnormal conditions of the intestines are largely responsible for the common headache malady, and for a generally lowered resistance, resulting in colds and even more serious ailments. Constipation is extremely prevalent, partly because our diet usually lacks bulk or other needed constituents, but partly also because we fail to eliminate regularly, thoroughly, and often.

Constipation, long continued, is by no means a trifling matter. It represents a constant and cumulative tax which often ends in very serious consequences.

Free water-drinking when the stomach is empty, especially before breakfast, is beneficial in constipation. Free water-drinking at meals may prove constipating.

The best regulators of the bowels are foods. Foods should possess sufficient bulk to promote the action of the intestines and should contain a due amount of laxative elements. Foods which are especially laxative are prunes, figs, most fruits except bananas, fruit juices, all fresh vegetables, especially greens of all sorts, wheat, bran, and the whole grain cereals. Oils and fats are also laxative, but cannot be used in sufficient-

ly large quantities to produce very laxative effects without producing loss of appetite. Foods which have the opposite tendency are rice, boiled milk, fine wheat flour in breach, corn starch, white of egg.

The use of wheat-bran in cereals, in bread, and even in vegetables is a preventive of constipation, as is also the use of agar-agar, a Japanese seaweed product. This is not digested and absorbed, but acts as a water carrier and a sweep to the intestinal tract. It should be taken without admixture with laxative drugs.

Paraffin oil is especially good as an intestinal lubricant to assist the food to slip through the intestinal tube at the proper rate of progress, provided the oil is first freed, by long-continued shaking with water, from certain dangerous impurities. Many refined preparations are on the market for use in constipation. Underweight people should not use these oils unless properly prescribed by a physician.

It is advisable, in general, to avoid cathartics except under medical supervision, since certain drugs are often very harmful when their use is long continued and the longer they are used the more dependent on them the user becomes. Laxative drugs, even mineral waters, should never be used habitually.

The occasional, but not habitual, use of an enema (with warm water followed always by a second enema

of cold water, to prevent relaxation) is a temporary expedient.

Massage of the abdomen, deep and thorough, with a creeping movement of the ends of the fingers on the left side of the abdomen from above downward, also promotes the process of defecation.

The normal man and woman

should find no difficulty in having complete movements regularly two or three times a day by merely living a reasonable life, being careful especially to avoid overfatigue, to include sufficient bulk in the food, to take regular exercise, including, in particular, breathing exercises, and to maintain an erect carriage.

PTOMAINE POISONING.

Certain kinds of bacteria when they grow in some foods, especially fish, shellfish, and mixtures of eggs with cream or milk, produce highly poisonous compounds called ptomaines. The eating of such contaminated food is followed by ptomaine poisoning. The formation of the ptomaines in food is followed by warm weather and long keeping.

The symptoms of ptomaine poisoning are headache, pain in the muscles, nausea, thirst, intense pain in the stomach, vomiting, and purging. The patient rapidly grows very weak and in severe cases goes into collapse. The symptoms may come on immediately after the food has been eaten or may not appear for some hours.

If vomiting has not occurred, give an emetic. Also administer a rectal injection of a pint of soapsoads to quickly empty the bowel. Follow the emetic in half an hour with a large

dose of castor oil. Keep the patient in bed, administer stimulants if necessary, such as small doses of strong coffee or a tablespoonful of whisky every two hours. Surround the extremities with hot-water bottles. Keep the patient warm.

Vomiting can be held in check by small drinks of plain soda water, ginger ale, or of iced champagne if available. No food should be allowed until the acute symptoms have subsided, and then only a liquid diet in small quantities at first.

A characteristic feature of true ptomaine poisoning is that the patient remains weak for a long period and that recovery is very slow, often-times requiring several weeks.

(Exchange.)

Cultivate the habit of walking with head up and the shoulders thrown back. It is cheaper and better than bottled tonics, says the United States Public Health Service.

HYDROGEN PEROXIDE.

The practice of applying hydrogen peroxide to fresh wounds is not recommended as a routine practice. It causes a great deal of pain, wets the wound, and is not an efficient germi-

cide. Hydrogen peroxide may be used sometimes to check hemorrhage or to clean up an old leg ulcer, but it should not be applied to other wounds except on advice of a physician.

U. S. P. H. S.

CARE OF THE MOUTH AND TEETH.

UNITED STATES PUBLIC HEALTH SERVICE.

It is important to take good care of the teeth. If they are allowed to decay, the food can not be masticated, indigestion results, and the body is not properly nourished. The bony processes of the jaws which hold the teeth in place are absorbed after the teeth fall out, allowing the cheeks to sink in, which makes the face look long and thin.

Dental decay is caused by fermentation of small particles of food which are permitted to remain in the crevices between the teeth. This fermentation is due to bacteria and results in the formation of acids which dissolve the lime salts of the teeth. The hard white outside coating of the teeth, known as the enamel, is first attacked. This is destroyed at spots where the food is lodged and the softer interior substance of the tooth is exposed; this is rapidly eaten away, and a cavity is formed which increases in size until only a hollow shell of enamel remains. The nerves of the teeth are extremely sensitive, and severe pain or toothache is produced when dental decay extends into a tooth. An abscess or gumboil may form at the root of a tooth. This causes a throbbing pain, swelling, and fever. It usually breaks through the gum, discharging pus, with relief of the symptoms; sometimes, however, the inflammation extends to the bone, ending in its necrosis or death. Occasionally pus organisms are absorbed into the blood and blood poisoning ensues.

An unclean mouth makes an ideal home for small organisms known as

endameba buccalis, which many believe are the cause of pyorrhea dentalis or Rigg's disease. In this disease there is inflammation of the gums, which become soft, swollen, and bleed easily. The disease extends around the roots of the teeth, pus exudes from their sockets, they are loosened, and ultimately fall out. The process may take a number of years, but more than half of the permanent teeth are lost in this way.

An unclean condition of the mouth renders the person more liable to catch cold, to attacks of influenza, bronchitis, and pneumonia. Headaches and neuralgic pains are often due to bad teeth. Many cases of so-called rheumatism result from the absorption of poison from the mouth and disappear when the disease conditions in the mouth are remedied. The same poisons often lead to sore throat, inflammation of the tonsils, disease of the eye and ear, and disordered digestion.

The teeth should be cleaned with a toothbrush at least twice a day, and care should be taken that all particles of food are removed. Wooden and metal toothpicks should not be used, as the gums are liable to be injured, which may be followed by inflammation and absorption of septic products. Quill toothpicks are less objectionable, but should be employed with care. When brushing the teeth, a small quantity of tooth powder should be placed upon the brush.

When tooth powder is not available Castile soap can be used for cleansing the teeth.

THE WARM BATH.

Aside from the cleansing effect for which baths are most commonly and primarily taken, the temperature at which a bath is taken can be made a matter of great value. In the following article by Geo. H. Fox, M. D., some of the effects of the warm bath are discussed.

The cold and the warm baths are almost directly opposite in their physiologic action and purposes. The warm bath dilates the tiny arteries, as is shown by redness of the skin, and causes profuse perspiration. The pulse and respiration are increased in frequency and the temperature is raised. The warm bath has an extremely soothing effect on the nervous system and for this reason is best taken at night before retiring. The perspiration which is likely to continue after a warm bath is dis-

agreeable to some, and may be prevented by sponging the body with cold water at the end of the bath. After an unusual amount of physical labor, when the muscles are sore and aching, nothing is more welcome or soothing than a warm bath. The blood is withdrawn from the muscles, lessening chemic change, and pain and soreness vanish speedily. In addition to removing muscular soreness and pain, the warm bath is relaxing and tends to relieve spasmodic conditions or cramps. For those who suffer from difficulty in getting to sleep, a warm bath just before retiring will often invite a refreshing slumber. While the warm bath is to be highly recommended as a means of relieving weariness after prolonged physical exertion, under no circumstances should a cold bath be taken at this time.

BOTULISM.

The Public Health Service, in common with other Federal, State, and municipal authorities charged with the enforcement of laws and regulations for the protection of the public health, has been deeply concerned because of the frequent reported fatalities in different sections of the country attributed to the consumption of food products infected with the organism known as bacillus botulinus. These fatalities have recently been traced to the consumption of ripe olives, although some cases have also been traced to home-canned string beans, home-canned asparagus, and home-canned corn.

Investigations so far carried on have shown that fatalities due to the consumption of olives have been limited to ripe olives packed in glass. No cases have been reported from the consumption of ripe olives packed in tin. Representatives of the Bureau of Chemistry have made careful investigations of the olive-packing plants in California, and it has been found that the process of sterilization employed in the case of olives packed in glass is usually inadequate. The jars are usually heated for a period of approximately one-half hour at the temperature of boiling water, which is not sufficient to insure the destruction of the

bacillus botulinus if this organism is present in ripe olives. According to investigations made to date by the Bureau of Chemistry it would appear that the public may protect itself by refraining for the present from the consumption of ripe olives packed in glass. As a further measure of precaution, no food of any description showing even the slightest unnatural odor, swelling of the container, signs of gas, or any evidence of decomposition whatever should be used for food purposes. In practically every case of botulism the food was shown to have had an offensive or abnormal odor. While all spoiled food may not contain bacillus botulinus, any spoiled food, even though the spoilage be slight, may contain it, and, in view of the fatal effect of very small amounts of toxin which this organism generates, the only safe rule is to examine carefully all food products before they are served and to discard those which are even slightly suspicious.

The Bureau of Chemistry has used every possible effort and has gone to the limit of its legal authority to remove all dangerous foods from the market by seizure under the food and drugs act. Since the law authorizes seizure only when the foods are actually found to be decomposed or to contain poisonous ingredients, since only an occasional package in millions is infected with bacillus botulinus, and since it is physically possible to open and examine but a comparatively few of the millions of containers entering interstate commerce, it is beyond the power of any of the authorities to protect the public completely. For this reason, the

necessity for scrupulous care on the part of persons opening and serving foods to discard anything which is spoiled is emphasized.

No one knows just how the bacillus botulinus gets into any particular food. It has been found in articles put up in the home by the careful housewife and in goods packed in commercial establishments. It may be present in a few packages only of any lot. There is no method, the Bureau of Chemistry states, by which the packers or home canners can assure themselves by casual examination before canning that a product does not contain the bacillus botulinus. If the food were in all cases properly sterilized and perfectly sealed, the development of the poison would be impossible, but no method of preserving food has yet been found which eliminated the occasional spoiled package. Failure to sterilize may not become apparent for weeks or even months after the canning of the article. If signs of spoilage have appeared when the container is opened, it is a clear warning that the product is no longer edible.

There is no greater possibility of botulinus poisoning in olives than in many other food products either commercial or domestic. Until this year it has been more commonly found in string beans, asparagus, and the like. It was originally found in sausage. It has been found in cheese; it is present sometimes in stock food, such as moldy hay and other kinds of spoiled forage, but has never been found in the Bureau of Chemistry's investigations in any kind of food that was not spoiled.

U. S. P. H. S.

NUTRITIONAL CLINICS.

Special classes, composed of children that are ten per cent or more underweight have been organized in the following schools:

5th Avenue, St. Josaphat, St. Adalberts, Dover Street, Cold Spring Avenue, St. Michaels, 4th Street, Garfield Avenue, St. Joseph, 8th Street, 18th Avenue, St. Vincents, St. Stanislaus, Mound Street, 21st Street, St. Boniface, Lee Street, Hopkins Street, Detroit Street, Jefferson St.

These classes consist of from fifty to seventy children. These children meet once a week for about one half hour in a special room, where they are weighed and given special instruction on food and habits conducive to normal health and weight. These children receive eight ounces of milk and two graham crackers in school every morning.

Special educational work is carried on in the homes by nurses of the Health Department and by a dietician employed by the Junior Red Cross. A special examination is made of every child by the school physician and a special nutritional record is kept.

Every child is given a weekly home record chart, on which it is asked to enter every day, what it ate and drank, when it went to bed and when it arose, the amount of rest and exercise; in fact, everything that may be related to its health, is entered. This weekly report is carefully reviewed by the doctor and nurse when the child is weighed and any errors of living are called to the attention of the child.

A small pamphlet has been printed by the Department, giving mothers a list of proper foods for school children.

In order to stimulate the schools and children to greater effort, there will be awarded on April 1st, and every month thereafter, three banners to the schools that have the largest percentage of children more than the normal gain for the preceding month.

At the same time that the banners are awarded, pins or badges will be given to ten children in each school, who gained the most number of ounces in weight for the preceding month.

At the end of the contest, which is June 18th, pins or badges will be awarded to all children who made more than the normal gain for this period of eighteen weeks, and medals will be given to all children who reached their normal weight. At each weighing, a gold star will be placed on the chart of every child who has gained weight.

The Junior Red Cross of Milwaukee has made it financially possible to do this nutritional work.

This is only a beginning, and we hope that by next September we will be able to have special health or nutritional classes in every school. The Junior Red Cross has placed an additional twenty-eight scales in public and parochial schools, which means that every public and parochial school in Milwaukee now has a scale.

Whose Treatment Are You Getting?

By JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

There are druggists who are filling prescriptions for you that were intended for someone else, and there are doctors who are handing you pills that were made for someone else.

The tendency of the druggist is to criticize the physician who dispenses his own medicine and of the doctor to criticize the druggist who prescribes for the patient. We believe that both may be justly criticized at times; the druggist when he prescribes for the patient without being able to make a proper diagnosis, and the doctor when he gives his patient medicines that he happens to have on hand, instead of giving him what he needs.

When you go to your tailor you expect him to take your measurements and make your suit accordingly. What would you think of your tailor if he said "I just measured my father for a suit and I'll make you one just like it. It's just the thing for you." Yet, when the druggist says: "I have just the thing for that cough of yours. I'll give you something that fixed up my wife," you never think that coughs differ just as much as the people themselves differ.

If people were as particular about their health as they are about their clothes, they would not be so willing to use prescriptions that were made for someone else. Of course, there are a great many ready made clothes which can be used by those that do not vary too much from the normal

or average size, but most people who come in for medicine vary from the normal, because they are supposed to be ill, and therefore cannot be treated by ready made pills. The doctors and druggists, however, are not alone at fault in this wholesale treatment of disease. Many people will insist on having the druggists refill old prescriptions over and over again for all of the neighbors and relatives.

No doubt, many people will claim results even if they did use some other individual's medicine and in some instances their claims are just, but in most instances, the effect of such borrowed or stolen prescriptions is either worthless or harmful.

One druggist told me that he did not see any harm in selling a patient with a cough, a cough mixture, because most people will only try one bottle, and if that doesn't help, they will call a doctor. His argument was that they would rarely continue taking his medicine until it was too late to call a doctor. This, no doubt, is the argument of many others who attempt to treat people without knowing what they are treating them for. They always feel that a doctor will be called before the undertaker and in that way save a coroner's inquest.

If you insist on not calling a doctor until you are deadly sick, spend any money on preliminaries? If you want to save money by not calling a doctor early we would advise you to really save money by not

spending any money for treatment, until you feel sick enough to want a doctor. By carrying out this plan, you will find that in most cases you

will get well without a doctor; in some cases you will need a doctor, and in a few cases, you may even have to get the undertaker.



FIRST AID TO THE INJURED



SPRAINS.

Sprains are the injuries produced by wrenching or twisting a joint. Sprains of the ankle, wrist, shoulder and knee are very common. Severe sprains should always be treated by a doctor if possible. There was an old saying that bad sprains were worse than fractures. As a matter of fact, many of these "sprains" were in reality small or partial fractures near the joint, especially when involving the ankle. In severe sprains of the shoulder, wrist or ankle, an X-ray examination of the affected part should always be made if it is possible to do so. Sprains of the ankle in which extensive areas of black and blue skin are observed, extending for a considerable distance up the leg, are almost always accompanied by fractures.

Sprains are accompanied by severe pain, always increased by motion of the joint, and hence there is often apparent lack of ability to move the limb. To this is added swelling and sometimes redness, and later on possibly discoloration.

The treatment of sprains requires absolute rest and immobilization of the joint. If at the wrist or shoulder, put the arm in a sling. If a

knee or ankle is involved, put the patient in bed and rest the joint on a pillow. Apply cold water compresses, using a thick dressing large enough to wrap completely around the joint and extend well above and below it. Hot-water compresses may be used if more agreeable to the patient. Continue the compresses until the pain and swelling subside. This may require from two to five days. Then cautiously begin rubbing with alcohol diluted with an equal amount of water or tincture of arnica. Later in addition to the rubbing, which should become gradually more vigorous, begin gently moving the joints by grasping the hand or foot and moving it in various directions. These motions should be made by the operator and not by the patient. The injured person should exercise great caution in beginning to use the part. In recent years, severe sprains and strains which resisted ordinary treatment have sometimes been greatly benefited by being baked in dry air at a very high temperature. This treatment, however, requires special apparatus and skilled supervision, hence is not available for home use.

U. S. P. H. S.

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.

Sixth floor City Hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division. Eighth Floor:

Food Inspection Division.

Venereal Disease Bureau.

Communicable Disease Division.

Medical School Inspection Division.

Bacteriological Laboratory.

Chemical Laboratory.

Tuberculosis Division.

Nursing Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.

Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

SOUTH SIDE DISPENSARY, WOOLWORTH BLDG., 5TH AVE. AND MITCHELL ST.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY (MARQUETTE MEDICAL SCHOOL), 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

North Ave. Station, 2918 North Ave.—Wednesday, 2:30 to 3:30 P. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

The National Value of "VITAL BOOKKEEPING."

WHIPPLE.

It is of the greatest importance to a nation that accurate records be kept of its vital capital, of its gains by birth and immigration and of its losses by death and emigration, for a nation's true wealth lies not in its flocks and herds, not in its dollars, but in its healthy and happy men, women and children. A well man is worth more to a nation than a sick man; a man in the prime of life is of more immediate worth than an old man or a child; a married man is potentially a greater asset than a single man. Hence, in a nation's vital bookkeeping the number of people, their age and sex and conjugal condition, their parentage, their health, the rate of births and deaths, are matters of great moment. Their environment is also important; their concentration in cities and villages and congested areas, their mode of housing, their occupation, their state of intelligence, their economic condition, their knowledge of sanitation, all contribute to the sum total of their usefulness to themselves and to society.

Boil the Water.

By GEORGE C. RUHLAND, M. D., Commissioner of Health.

Again the Health Department issues its warning to the public to boil all water used for drinking purpose.

To restate the reasons for this warning, which the department has found it necessary to issue each spring, briefly the following:

The water supply for Milwaukee is obtained from Lake Michigan by means of a crib located at a depth of sixty-seven feet, two miles from shore, and about five miles north of the river outlet.

Unfortunately, all of the city's sewage—about eighty million gallons per twenty-four hours — is discharged through the river into the lake, with the consequence that the city's water supply becomes heavily contaminated.

Pending the completion of the sewage disposal plant and the installation of a filtration system, the city is relying entirely upon chlorination as a means for disinfecting its water supply.

This method has been found adequate so far, especially with the relocation of the intake which moved the crib two miles further north from the harbor outlet.

For the bigger part of the year, the prevailing winds coming from the west and northwest also favor keeping the sewage away from the intake.

However, during the spring of the year, winds and storms more often come from the southwest, south, and southeast. Under these conditions the raw water over the intake is likely to become heavily contaminated.

While the Water Department endeavors to meet this situation by operating with an excess amount of chlorine at all times, and increases the dosage with storms coming from the direction indicated, it is obviously impossible to be certain that the dosage is sufficient.

It takes at least twenty-four hours to get the results of bacterial examination. These show that contamination may vary enormously within a few hours. Since these bacterial determinations are possible, unfortunately, only after the fact, dosage of necessity to a considerable extent must become guesswork.

The present warning, therefore, is issued not because at the present time there has been noted an unusual contamination, but entirely as a precautionary measure based upon experience and observation of the past.

Until the sewage disposal plant is completed, and until a filtration system is installed, there remains only one other additional means of safety, and that is: boil the water.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

MARCH 1920.

Vol. 10, No. 3.



IF YOUR Health is worth
as much as your Business,
why not give it as much
attention?

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

GEORGE E. ADAMS.....Vital Statistics
GEO. P. BARTH.....School Hygiene
F. E. CHURCH.....Bacteriology
RUSSELL W. CUNLIFFE.....Chemistry
GEORGE R. ERNST, M. D.....Tuberculosis
C. J. KENNEY, M. D.....Contagious Diseases

E. T. LOBEDAN, M. D.....Child Welfare
AGNES J. MARTIN, R. N., Superv. of Nurses
WM. J. MCKILLIP, M. D., Venereal Disease
STANLEY L. PILGRIM, M. D. C.,
.....Food Hygiene
T. F. THOMSON, M. D.....Sanitation

STATE LAWS YOU OUGHT TO KNOW.

SCARLET FEVER.

Quarantine of the patient for at least twenty-one (21) days from the beginning of the disease and as much longer as the severity of the case may demand, that is, until mucous membranes of nose and throat are normal, complete desquamation or scaling of the skin of the patient and disinfection of the patient and premises.

Quarantine of all adults living in the family with or in any way exposed to the patient while the house remains quarantined, unless said adults submit to thorough disinfection of their person and clothing and take up their residence in some other building during the time that said quarantine is maintained.

Children in a family associated with a case of scarlet fever may be removed to a separate building after disinfection of their person and clothing and must be kept in isolation for a period of ten days or

until the symptoms of scarlet fever develop.

When a patient suffering from scarlet fever is removed to an isolation hospital, the premises from which such patient is taken must be thoroughly disinfected, and all children in the same household must be kept in isolation for a period of ten days from the date on which the afflicted patient was removed from the home.

Isolation of patient and children associated with the patient for ten days after the removal of quarantine and disinfection of premises.

Children convalescing from scarlet fever must not attend school for at least six weeks from the beginning of the disease. Children who have been associated with the patient suffering from scarlet fever shall not attend school for ten days after disinfection of premises and removal of quarantine in quarantined home.

The law requires that YOU report to the Health Department every case in which communicable disease is suspected.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

MARCH 1920

CHLORINE NOT THE CAUSE.

By GEO. C. RUHLAND, M. D., Commissioner of Health.

Just as the copy of this issue for the Bulletin was ready to go to the printer, the city was subjected to a recurrence of the obnoxious odor and taste in its drinking water supply, which, as will be remembered, in 1918 called forth such bitter resentment as to bring about the mobilization of both the state and federal authorities for the purpose of abating the nuisance.

Though not lasting for as many days, nor being of the intense character as in 1918, the disagreeableness of the odor and taste was quite sufficient to fully justify the acrimonious denunciation generally voiced.

To subject a community of over half a million of people to a situation where its water supply—one of life's first necessities—is made practically unusable, is an outrage that cannot be condemned too harshly.

It is exceedingly unfortunate that under circumstances so distressing and irritating, the fallacious report again has been put into circulation that the obnoxious odor and taste is the result of the chlorine which is being used in disinfecting the city's water supply.

The spreading of such a report is pernicious in the extreme and can have no other effect than to mislead the community as to the true cause of the nuisance and to hamper the departments that are charged with the responsibility for the water sup-

ply and the protection of the public health.

Chlorine, as has been said many times before, is being used daily and constantly for the disinfection of the city's water supply. It is not being added only now and then and in a haphazard way. It has been used for many years now, and is applied under the supervision of an experienced chemist. It is being used in the same way and for the same purpose in practically every large American city.

Chlorine must be used until the sewage disposal plant is completed and a filtration system has been installed. Until then chlorine stands as the only means of safety between the public and disaster.

Chlorine is not the cause of the obnoxious taste and odor. The investigation in 1918 definitely proved that the obnoxious taste and odor in the water was mainly due to phenol or carbolic acid.

The source of the contamination was traced to a plant several miles beyond the city's limits, which manufactured carbolic acid, and which discharged tons of this acid into the lake along with its waste products.

The operation of the plant in question has been suspended now for more than a year. Warning was given, however, at that time by the federal authorities, who assisted in the investigation, that recurrences of

the nuisance might occur as the deposits of the acid might be churned up by storm and wave action.

This, then, may explain the present recurrence. It is, however, also possible that the industrial effluents from other plants may be responsible.

These possibilities are being investigated. In the meantime the matter has also been taken up with the State Board of Health, which, under the laws passed at the last session of the Legislature, has been given ample power to deal with the situation, should it prove to be beyond the city's jurisdiction.

PLAY AND RECREATION.

By GEORGE C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

The program of the Extension Division of the Milwaukee Public Schools for this year calls, among other things, for additional playgrounds and additional social centers.

We wish to go on record as being heartily in favor of both these activities, and endorse the division's request for their enlargement.

Milwaukee so far has not met her opportunity and responsibility in the matter of providing adequately for play and social recreation. Practically every other large American city has provided more liberally in this respect.

Play and recreation are important factors in the development and maintenance of our physical and social well-being and health.

Playgrounds are fully as necessary for the best development and training of the child and future citizen as is the school. The two must go together. A healthy mind can develop only in a healthy body. The child needs physical exercise in order that its body may develop properly.

Such exercise is best accepted in the form of play. Play under supervision, as it is offered at our public playgrounds, will do more, however, than merely develop muscle. It will develop discipline and a sense of fairness. It will develop true democracy. It will help to keep the child straight by developing a wholesome outlet for surplus energy.

Play and recreation are necessary also for the grown-ups. All work and no play is just as harmful to the adult as it is for the child.

It is not enough to shorten hours of labor, it is fully as important that suitable recreation be provided for the hours that are not spent in labor. There is danger where hands are kept idle. The social centers provide wholesome diversion and valuable opportunity for selfimprovement.

Inasmuch as the necessary money for a reasonable enlargement of these activities fortunately has been provided, there should be no delay now in getting these activities published.

This is the time of rapidly changing temperatures and slushy weather conditions—a combination that is likely to develop colds. Play safe; protect yourself adequately. Keeping your feet warm and dry will go a long ways towards avoiding colds.

THE MILK PROBLEM.

BY JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

Although milk, as a food, is as old as the world itself, yet few people even in this day and age realize its value. From laboratory experiments as well as from actual experience we know that the development, the health and the very existence of most animals as well as of people is dependent more upon milk than anything else, excepting air. We know that animals as well as children raised on milk are larger and stronger than those that are raised on substitutes. Even chickens whom nature intended to raise without milk do so well on milk that milk-fed chickens command the highest market price.

There must be something in milk besides just so much proteid, fat and carbohydrate, or its results would not be so marvelous. Since milk appears to be so essential to health and life we believe the time has come when it will not be out of place for a health officer to discuss the milk problem.

We hear a great deal about the conservation of our natural resources, such as lumber, oil, coal and other minerals, but hear very little concerning the conservation of our most natural resource, milk. In ancient times the land promised to the Israelites was not the one abundantly supplied with lumber, oil, coal and minerals, but the one flowing with milk and honey. We have been so falsely led to believe that there are substitutes for milk, or we have not studied the milk problem sufficiently to realize how easy it is to exhaust our supply. The best way to increase the supply of milk is to

increase the demand. Milk is not manufactured like beer or soda-water, where the supply can be increased in a day's notice. It takes from two to three years to build a milk factory. Each factory or cow will produce about two gallons of milk per day, so that if we ever permit our milk supply to decrease it will take years to increase it. No dairy-man will keep his cows very long just for the pleasure of feeding and milking them. He is just like the rest of us, and will turn to the thing that brings him the most money. If he can't afford to raise, feed and milk cows for eight cents a quart for milk, he will sell his cows to the butcher and raise grain or potatoes instead of milk. Many people think that milk at 12 cents a quart is exorbitant and yet gladly pay 20 cents a quart for soda-water, ginger-ale or near-beer, all of which can be made in unlimited quantities every day of the year.

The popular thing nowadays is to make the public believe that they are charged too much for the necessities of life, regardless of the facts in the case. If the druggist or grocer realizes a profit of 5 cents on every bottle of soft drinks, everyone feels that he is entitled to it, but if the milk distributor makes a half cent on a bottle of milk, he is considered a profiteer.

Let us be fair to the people who supply us with milk. Let us protect our future welfare by increasing the supply of milk, which can only be done by increasing the demand and paying enough to make it worth while for the farmer to produce it.

HOW TO CHOOSE YOUR FOOD.

From "Personal Hygiene"—Pyle.

It is frequently asked what should be the character of the food taken. The answer must at first be as general as the question; and it may be said that the digestion may be taxed either in the quantity or the quality of food, and in direct ratio with the resisting power and vital energy of the individual. The climate and occupation must also be considered. A stalwart wood-chopper requires in the winter large meals rich in fats and carbohydrates, which, in the process of oxidation, produce relatively a large amount of heat, and albumins that more directly nourish the muscles and nerves. With such a worker, so long as there is sufficient nutritive value in the food, great attention need not be paid to its variety, nor even to its digestibility. For instance, certain woodsmen crave a very resisting form of pastry because it "stays by" and does not too quickly leave the stomach empty. For such persons the hastily prepared oatmeal-porridge is suitable, because it is slow to digest.

For the sedentary and indolent person the supply of food should be small and digestible. For the sedentary brain-worker the amount taken should be increased in proportion to his mental activity, and it should be easily digestible and very nutritious. In a cold climate, as is generally known, large amounts of fats are required, while in hot climates the carbohydrates and fruits seem to be demanded by the organism.

For the ordinary business or professional man, or the student, a

breakfast may be advised to consist of one or two soft-boiled eggs or an omelet, a piece of bacon or fish, a roll or some toast, and one cup of coffee. Oatmeal is unsuitable, because it is rarely well mixed with saliva, but is hurriedly bolted, deglutition being facilitated by the covering of cream. The same may be said of other "cereals", except those that are partially dextrinized by previous cooking in the process of manufacture. Early in the morning at least a glassful of pure water, neither iced nor hot, should be taken.

If the breakfast hour is at eight, the luncheon hour should be at one. Milk is an excellent aliment for this meal. It disagrees with some, but this is usually because other foods are taken with it. Milk is not to be regarded as a drink, but as a food. It is best taken alone, but it generally agrees better if a certain amount of starchy food is taken at the same time, although the latter should neither be saturated with milk nor washed down by it. Milk should be drank and bread eaten slowly. The object of this is to take advantage of the action of the saliva in converting starch into maltose. For those who dislike it, or with whom it does not agree, the luncheon may consist of broth or light soup, bread and butter, a few oysters, sweetbread or stewed lobster, and perhaps a little farinaceous pudding like corn starch, thoroughly prepared rice, or tapioca. Of such a luncheon fruit may form a part, or fruit may be taken before breakfast and rarely after dinner.

With such an arrangement, dinner should be taken at six or thereabouts. This meal should be as much as possible served slowly in courses. The conventional arrangement of the courses at dinner is a desirable one, and is apparently the result of the experience of ages. The preliminary course of a good soup that is not too rich, to be followed by fish, then a joint or roast, with one or two vegetables, a small salad, bread, and some simple dessert constitute a typical dinner, and in amount should be sufficient to make up for the somewhat scanty meals that preceded it.

The digestion is usually taxed in proportion to the variety of the foods taken; therefore, when the stomach reacts unfavorably to an extended meal, food should be limited—first in variety, and second in quantity. The precise amount to be taken during all these meals is a matter that must depend upon the individual requirements. As a rule, more food is taken than necessary; but there is a large class of nervous people who eat regularly, but rarely take a sufficient amount of really nourishing foods to replace that which is lost by waste.

HOME CARE FOR THE SICK.

BY GEO. C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

Sickness, unfortunately, still is all too common among us. According to a survey made some time ago, the number of sick in Milwaukee each day may be estimated as between forty and fifty thousand.

The survey also showed that over 50% of these were without any medical attention. While it may be argued that for a goodly number of them this may not have been of any material consequence, yet it surely is a fact that an equal, if not greater, number was seriously damaged because of the lack of proper care and attention.

There is no doubt that annually a great many lives are lost because of the unpreparedness of the home to render the necessary first aid until the doctor comes, and that many a patient is lost because of the inability of the home to afford trained help in nursing the sick.

The home of moderate means particularly is at a serious disadvantage in this situation, because, as is well known, only the very wealthy and the very poor are able to receive the best medical care and attention. Outside of public and private hospitals, the assistance of a trained nurse is rarely available for the family of average means.

In recognition of this state of affairs, and in recognition also of the great importance to bring into the average home a better understanding of the principles of nursing, the department has arranged to give a free course of instruction in First Aid and Home Care of the Sick.

It is not the intention of the department to train a corps of professional nurses, but it is hoped that by offering this course, those who will avail themselves of the opportunity will be placed in possession of some

definite knowledge which will enable them to apply first aid until the doctor comes.

Similarly, it is hoped that by training the mother, upon whose shoulders ordinarily falls the responsibility for such sickness as comes to her home, she may be made more competent and efficient to render this service. While the devotion of a mother is an invaluable asset where she is called upon to care for her sick child, mother love alone cannot take the place of trained and intelligently guided efforts in the care of the sick.

The course, as it is now offered, covering a period of five weeks of two lectures per week, is in our judgment a distinct improvement over the course which was offered by the department several years ago. The

instruction has been reduced to practical demonstrations almost throughout, so that it will not be a matter of presenting abstract knowledge.

In giving this course, there is, however, yet another advantage which the department hopes to gain from it, and that is the implantation of a better understanding of the principles of hygiene into the home from which some member has been in attendance upon this course. It is not merely in dealing with the individual case of sickness as it arises, but more often in the prevention of such sickness by a better understanding of the principles of personal hygiene, that the department hopes to gain for the individual, as well as for the community, a substantial advance in the matter of the protection of the public health.

POISONING.

UNITED STATES PUBLIC HEALTH SERVICE.

The symptoms of poisoning depend upon what poison has been taken. Many poisons produce nausea, vomiting, purging, and collapse. Others bring on convulsions, or spasms, and a few cause the patient to become gradually unconscious without any other striking symptoms.

In endeavoring to determine what poison has been taken, if no information can be obtained from the patient, an examination of the surroundings may throw light on the case. An empty bottle may be discovered in the vicinity or some of the substance may have been spilled over the floor or clothing which can be smelled and otherwise examined. It may be ascertained that certain poisons were in the house and one

of these may show signs of having been recently opened or handled. Always smell the breath and examine the mouth. The mouth may be stained or burned by certain chemicals in a characteristic way, such as follows drinking carbolic acid or other strong acids.

If the patient has taken a drug accidentally he will, of course, be willing to tell what it was, if he is conscious.

A skilled physician is often able to decide from the symptoms what poison has been taken, but this cannot be expected of a layman. Always send immediately for a doctor if poisoning is suspected, but pending his arrival certain first-aid measures may be undertaken.

General treatment of all poisoning. In the absence of a direct knowledge as to just what to do, the following line of procedure is recommended:

First. Give the antidote if it is known and available. Lacking the proper antidote, white of eggs, milk, or strong tea may be administered, as they will do no harm and are somewhat antagonistic to a number of common poisons.

Second. Get the poison out of the stomach as promptly as possible.

After administering the antidote the stomach should be emptied as quickly as possible. The antidote is expected to combine with the poison and render it harmless, but it may not be effective, or the resulting mixture may be harmful if afterwards absorbed. To cause vomiting, tickle the back of the throat with the forefinger or give an emetic.

Emetics.—Emetics are substances which produce vomiting. The ones most available are luke-warm water mixed with mustard or common salt. A heaping teaspoonful of mustard or salt to a cupful of luke-warm water—stir it and have the patient drink the mixture. Repeat the dose every 10 minutes until 3 or 4 tumblerfuls have been swallowed if vomiting does not occur sooner. It is well to cause the patient to vomit several times and to have him drink freely of luke-warm water in the intervals. This process assists in washing out the stomach. One or two teaspoon-

fuls of sirup of ipecac or wine of ipecac are good emetics. Such preparations of ipecac are often kept in the home to administer to children with croup.

There are a few poisons in which it is not wise to give an emetic, but in an emergency, in the absence of a doctor and specific knowledge to the contrary, the general rule for giving an emetic holds.

Third. After giving the emetic and producing vomiting, the various symptoms which arise should be treated according to the nature of the case.

If the pulse becomes rapid and weak, hot coffee, one-half teaspoonful of aromatic spirits of ammonia, or small doses of whisky or brandy should be given. If the patient is greatly weakened and prostrated, as he generally will be, hot-water bottles should be applied around the feet and extremities and measures taken to sustain the general strength.

Warning.—Poisons, such as carbolic acid or antiseptic tablets, should not be kept on the same shelf with harmless remedies. Such drugs should be kept in a separate place or in a special box and well out of the reach of children. Poisonous solutions should never be left in drinking glasses, as children or even adults may drink them without the knowledge of their dangerous character.

Dr. Wm. Hopkinson gave a most interesting and helpful talk to the Department Nurses and the nurses of the Visiting Nurses' Association on February 27th. Some of the points Dr. Hopkinson drove home

were that an apparently sound tooth does not always mean a perfect tooth, that a clean tooth will not decay, therefore the importance of early instruction in the use of a tooth brush. That poor teeth cause malnutrition, not malnutrition, poor teeth.

PATENT MEDICINES

BY GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

Whatever else may be said of the patent medicine man, he certainly is strictly up-to-date. Not only does his golden medical discovery — gilded with the gold which a gullible public is willing to pay for it—exactly fit the needs of the most recently discovered malady, but he also very tactfully considers the public's wishes for seasonal changes.

Just now it is spring tonics and blood purifiers for pale people. If you want to have color in your cheek, get rid of that tired feeling, stir up the sluggish liver, which has been hibernating throughout the long winter, have your food taste good, kill a cold, ventilate your nose, limber up the stiff joints and sore muscles, just take your favorite newspaper, turn to the advertising page, close your eyes, say: ene, mene, mina, mo, put your finger on the page, and nine times out of ten you will have found precisely what you want.

It does not make so much difference if your diagnosis is correct or not, the guaranteed remedy will take care of that alright. If you are in doubt at all, read a testimonial or two—you will always find a few—and restore your faith.

Perhaps you may never have heard of such a place as Nace, Va., but then G. L. Keltz lives there, and you

have his assurance that he was miraculously cured of rheumatism when all else failed. By the way, isn't it too bad that most of these testimonials are by people of such far away places, whom you cannot readily consult.

Occasionally, it is true, we find someone in our own burg who has affixed his or her name to a testimonial. Oftimes, as we have found, this is done without any knowledge on part of the signer as to what the testimonial contains. At times it is done for the consideration of a few bottles gratis, for nothing, free.

At times it happens even that the testimonial which proclaims a wonderful cure over the name of some individual, appears simultaneously with the death notice of the signer of that testimonial. That, of course, is exceedingly embarrassing, but then, the average person who reads the patent medicine literature is not supposed to peruse the death notices at the same time.

All of which, we must confess, makes us just a wee little bit conservative to accept patent medicines and their testimonials at face value.

Before you invest any more money in patent medicines, call up the Health Department, Broadway 3715, and find out about them.

Beware the much advertised "sure cure" for disease, warns the United States Public Health Service. While experimenting, the disease often gets beyond the point where it can be cured by a competent physician.

NUTRITIONAL CLASSES.

By JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

The interest in the nutritional classes conducted by the Junior Red Cross and Milwaukee Health Department, in thirteen public and seven parochial schools, is increasing daily.

Classes have been increased in many schools from 50 to 80 pupils. This increase, no doubt, is due to the fact that teachers, parents and pupils are all impressed with the value of our work. Many schools that did not ask for nutritional classes when the work was first started are now begging us to come in and we hope that the Junior Red Cross will authorize us to start classes in at least a few more of the most needy schools.

These nutritional classes are not only attended by the undernourished children, but also by many parents. At the Hopkins Street School, this week we had an audience of seventy children, fifty-nine mothers and two fathers. This shows that parents are interested much more in the health of their children than many of us ever realized.

We have all seen many undernourished children and considered it nothing unusual, but when one looks into the pale faces of eighty undernourished children, one is impressed with the fact that there is something wrong somewhere. If all of the severely undernourished children in the City of Milwaukee could be brought together, it no doubt would convince the most skeptical that no attention must be given to malnutrition. Our results so far appear too good to be true. About 80% of the children are making much more

than the average gain. In the Cold Spring Avenue School, we have one girl who has gained eleven pounds in three weeks. We have had several children gain five or six pounds in one week. We have hundreds of children who have averaged one pound a week.

Whether this interest and these gains will continue until June, remains to be seen, but we feel that if the principals and teachers will continue their fine cooperation with this Department, the success of this work will also continue.

The Junior Red Cross, Milwaukee Health Department, school principals and teachers, however, are not the only ones who have made it possible to do intensive health work on 1,200 children. The Gridley Dairy Co. are delivering about 1,200 half pint bottles of milk to twenty schools every morning, for less than two cents a bottle. It is just as great an expense to fill a half pint bottle as it is to fill a quart bottle, and yet the Gridley Dairy Co. is furnishing this milk to the children for less than 8 cents a quart. The Wright Dental Supply Co. and the E. H. Karrer Co. have purchased 432 sanitary tooth brushes which are to be given to children in the nutritional classes who are unable to provide themselves with brushes. The Kolyos Co. gave the Department 240 samples of dental cream for distribution. Nothing is accomplished by telling these children to brush their teeth if we do not see to it that they get tooth brushes and paste. One little boy said that he did not need

a tooth brush, because he used his father's. Many children haven't even a family tooth brush. The Thompson Malted Milk Co. has donated a large quantity of malted milk, which will be placed into the homes of children who prefer malted milk to other milk.

This Department has no funds with which to give material relief, and it therefore appreciates any assistance from the outside, until time arrives when the city can take care of all needy children, or when there won't be any needy children.

PYORRHEA.

By PHILIP F. SCHAFER, D. D. S.

The most harmful of all mouth lesions or infections which ruin the health of our people is pyorrhea (which means "running pus"), because it is so prevalent. At least 60% of our population over 40 years of age have pyorrhea at some stage or other, and many under that age also have it. Pyorrhea in its destructive stage liquefies or turns to pus the soft tissues, (gum and pericemental) surrounding the teeth, destroys the bone of the jaws and causes the infected teeth to either fall out or become so loose that they must be extracted. The pyorrhea pockets are filled full of highly virulent germs, all destructive pus germs, and in many cases the pneumococcus. There is a constant absorption of these toxins both into the blood stream and the digestive tract. The digestion is ruined, the blood stream polluted and the central nervous system impaired. There is no diseased condition in medicine more injurious to the general health of the public and there is no disease today more prevalent and doing more to undermine the physical health of our people than this disease of the mouth.

It has often been asked, can pyorrhea be cured. This can be

answered both in the affirmative and negative. It all depends on what stage the disease has reached; and again the word "cure" is a relative term as applied to any disease. In the treating or curing of pyorrhea we cannot replace lost gum and pericemental tissue where it has been destroyed, but it can truthfully be said that the soft tissues can be freed from germs and pus, irritations removed, and the parts made altogether hygienic, healthy and comfortable. With this much accomplished the resulting improvement in general health usually speaks for itself.

Dr. Mayo has repeatedly said: "The first step in preventive medicine lies in the mouth." It might be added that progressive dentistry is preventive dentistry. Prevention is the keynote of the handling of the problem of pyorrhea. Mouth hygiene and prophylaxis taught in public schools in the form of tooth brush drills and lectures, dental clinics, research work, and the early recognition of the condition by the dentist—all these make for prevention and should be strongly encouraged by our professional men and supported by the public.

 FIRST AID TO THE INJURED **Disinfection of Wounds.**

It was formerly the custom to attempt to destroy any bacteria which might have gotten into a wound at the time of the accident by washing the injury with solutions of carbolic acid, bichloride of mercury, hydrogen peroxide, or similar substances. It has been demonstrated, however, that it is practically impossible to kill all the germs in this way and that if the solutions are of sufficient strength to kill the germs that they will do harm to the tissues. In first-aid work wounds therefore should not be irrigated with such solutions unless they are very badly soiled with dirt or if it is necessary to wash out a number of small foreign particles. If the wound is reasonably clean it is much better to simply apply tincture of iodine. This is done by taking a clean match or toothpick, twisting a small amount of cotton around the end to make a swab, dipping the swab in the iodine, and applying a light coat first to the wound and then to the surrounding skin. The iodine will destroy most of the germs and do no harm to the tissues. Experience has shown that in first-aid work wounds which have been treated with iodine in this way do better than those which have been washed out with watery solutions. If the skin of the hand, or part which happens to be injured is very dirty, it is permissible to dampen a cloth slightly with soap and water or gasoline and to wipe off as much of the dirt as possible from the skin some distance away from the wound,

being careful, however, to avoid touching the wound itself or the area immediately adjoining it. Under no circumstances should ordinary water be put into a wound, nor should the cleansing cloth be sufficiently wet to permit the chance of any of the cleansing fluid running into the wound. After the tincture of iodine has been applied the wound should be dressed and the dressing held in place with a bandage or other appliance.

Tincture of iodine is sometimes used just as it comes from the drug store, but it is very much better to dilute it. When buying tincture of iodine for application on wounds it is advisable to always have the druggist add an equal amount of grain alcohol to the regular preparation, making a half-strength tincture. This diluted solution is very efficient for killing bacteria and is not so likely to irritate the skin as the full strength. The weaker solution should be always used for applying to wounds when available. It is also wise to allow the alcohol to evaporate for a few moments before applying the permanent dressing.

Wet dressings should not be placed on skin which has been recently painted with tincture of iodine, as irritation is likely to result. Iodine may be removed by washing with alcohol. The irritating action of too much iodine on the skin can be checked by applying thin, cooked starch paste.

U. S. P. H. S.

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.

Sixth floor City Hall:	Communicable Disease Division.
Executive or General Offices.	Medical School Inspection Division.
Child Welfare Division.	Bacteriological Laboratory.
Vital Statistics Division.	Chemical Laboratory.
Sanitary Inspection Division.	Eighth Floor:
Food Inspection Division.	Tuberculosis Division.
Veneral Disease Bureau.	Nursing Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturady afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.
When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY, MARQUETTE MEDICAL SCHOOL, 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

North Ave. Station, 2918 North Ave.—Wednesday, 2:30 to 3:30 P. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HEALTH BRIEFS.

A special course on social service is being given to the nurses of the department.

A total of 2,199 inspections were undertaken by the Sanitary Department for the purpose of correcting nuisances and insanitary conditions.

The Chemical Laboratory and Bureau of Food Inspection have been very active in investigating and examining soft drinks. Seven cases, involving adulteration of food and the illegal use of preservatives, were taken into court and brought conviction of the defendant.

During the month of February, school physicians made over 11,000 morning inspections, completed 3,737 physical examinations, excluded 309 children; 2,736 special examinations as to dental conditions were made out of which 416 were given treatment. The eye, ear, nose and throat specialists attached to the service, handled 173 special cases.

The Bureau of Communicable Diseases reports a total of 72 cases of small pox during the month of February. All of these cases occurred among the unvaccinated, mostly children of school age. Over 3,300 vaccinations were undertaken by the Bureau as a control measure. If every one were vaccinated in early life, small pox would soon disappear.

The report of the Nursing Division for the month of February shows a saving of 3,148 calls, or nearly one-third, in the follow-up home call work, by being able to take care of more than one condition at each call. This is rather striking proof in favor of the department's district nursing plan, under which each nurse engages in all of the nursing activities of the department in her district.

FIRST AID

AND

Home Care of the Sick

FREE COURSE
=====OF=====

INSTRUCTION



===== CALL =====

Milwaukee Health Department

CITY HALL

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MAY 11 1920

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

APRIL 1920.

Vol. 10, No. 4.

*"THERE is no Contagion equal to the
Contagion of Life. Whatever we sow
that shall we also reap, and each thing sown
produces of its kind."*

—RALPH WALDO TRINE.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

GEORGE E. ADAMS.....Vital Statistics
GEO. P. BARTH.....School Hygiene
F. E. CHURCH.....Bacteriology
RUSSELL W. CUNLIFFE.....Chemistry
GEORGE R. ERNST, M. D.....Tuberculosis
C. J. KENNEY, M. D.....Contagious Diseases

E. T. LOBEDAN, M. D.....Child Welfare
AGNES J. MARTIN, R. N., Superv. of Nurses
WM. J. MCKILLIP, M. D., Venereal Disease
STANLEY L. PILGRIM, M. D. C.,
.....Food Hygiene
T. F. THOMSON, M. D.....Sanitation

STATE LAWS YOU OUGHT TO KNOW.

Whooping Cough.

1. Cases must be reported to the local health officer within twenty-four hours.

2. Conspicuous placard on house.

3. Isolation of patient until after whooping stage (about six weeks).

4. Children who have whooping cough are not permitted to leave the premises and children other than members of the family shall not enter or remain upon the premises while the home is placarded. Well children may go to school.

5. Thorough disinfection of the infected rooms and contents after death or recovery of patient and before placard is removed.

Smallpox.

For the patient: Quarantine until after all crusts or scales have fallen off or been removed, and the disinfection of the patient and premises.

For exposed persons: Quarantine for fourteen days from date of last exposure, unless successfully vaccinated, and person and clothing disin-

fected, or protected by a previous attack of the disease and person and clothing disinfected.

Smallpox in schools.—Section 40.71, "To prevent the spread of smallpox the local board of health of any city, incorporated village or town where the disease is present in any school district or part thereof, which is included in such city, incorporated village or town, shall prohibit the attendance at school in any such district or part thereof, for a period of twenty-five days, after the appearance of smallpox, of any and all pupils and teachers who have not been successfully vaccinated or who fail to show a certificate of recent vaccination."

Section 1413m. "Should new cases of smallpox continue to develop in such school district or part thereof, after the expiration of twenty-five days, the local board of health shall upon the advice and consent of the State Board of Health, renew such order for another period of twenty-five days, or so many days thereof as the State Board of Health may deem necessary in order to control the epidemic."

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

APRIL 1920

SEWER GAS.

BY GEO. C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

A recently published press dispatch quotes a London sewerman to the effect that they—the sewermen—were the healthiest people in London.

The report describes the sewerman, who, as we are informed, for fourteen years has been touring the sewers of London, as "peachy with the bloom of health and with eyes clear and blue."

The sewerman is further quoted as ascribing his unusual robustious health to the nature of his work, and as recommending the work as especially healthful for the consumptive who wishes to regain both weight and health.

While we are not disposed to recommend sewers as sanatoria for the tubercular, or otherwise as health resorts on the strength of the sewerman's testimony, there is, nevertheless, a valuable lesson to be gained from this report, insofar as it corroborates the fact that sewer gas or air does not possess those dire disease producing properties with which it has been popularly credited.

There is nothing new in the story of the London sewerman. Careful investigations of the occupational hazards of those employed in sewers have been made from time to time in various large cities. These investigations all have shown the same result,

in that they found that those so occupied were not only not suffering in health because of their occupation, but usually enjoyed excellent good health.

It is not to be argued from this that the occupation of a sewerman should be the occupation of choice if one wants health.

It should be clear, however, from these well authenticated reports that there is nothing in the old sewer gas bugaboo.

The air coming from sewers is unpleasant, to be sure, and we don't want it in our homes.

Sewer gas, however, does not carry typhoid or any other germs; the air in sewers being moist, on the contrary, is singularly free from germs—a fact which no doubt is to the advantage of sewermen.

There is no reason to worry about sewer gas; nor is there any reason for spending a lot of money on expensive traps for protection against danger from sewer gas. For the purpose of avoiding offensive odor, the house plumbing should be provided with proper and suitable traps and vents. It is not necessary, however, to put in a trap in the main house drain, nor does the State Plumbing Code any longer require this.

Compulsory Dentistry for Children.

By JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

Notwithstanding the fact that the medical profession as well as the more intelligent laity are convinced beyond all doubt that a child's present as well as future health is dependent more upon good teeth than any other factor, it appears that about 70% of all school children have defective teeth. When good teeth are so vital to a child's life, it seems incredible that parents, teachers, and health authorities could permit so many children to have bad teeth. The reason that so many children have defective teeth, undoubtedly, is mostly due to the fact that children are permitted to decide on their own dental needs. As long as children are not suffering from excruciating toothache, they will postpone their trips to the dentist from one year to another and parents usually are ready to approve of such delays on account of well intended but short-sighted sympathy for their children. That it is not a question of expense is easily proven by the fact that many children in well-to-do families have neglected teeth and many children in poor families who have been urged by our school nurses for years to attend our free dental clinics, have neglected to do so.

We know from past experiences in health and educational work that we cannot depend entirely upon parents

and children to voluntarily do what is best for themselves and the state.

We have compulsory school attendance.

We have compulsory vaccination for smallpox.

We have compulsory quarantine of people with contagious diseases.

We have laws to keep children under 14 years out of industry. In fact, we depend very little on voluntary cooperation of parent or child when the child's future welfare is at stake. Why not then compel children to take better care of their teeth? We may have a free dental clinic in every public and parochial school and still have thousands of children suffering from neglected teeth, unless something is done to make them attend these clinics or go to their family dentist regularly.

No child should be promoted from one grade to another without a doctor's and dentist's certificate of good health. A child whose teeth and general health are not the best, is not going to improve in health by making the school work heavier. If children and parents realized that school promotions depended as much upon the teeth of children as well as upon their brain, they would make more of an effort to keep teeth from decaying and if once decayed, consult a dentist immediately.

Don't always call the aching joint "rheumatism", says the United States Public Health Service. Bad teeth are sometimes the real cause and it is always wise to consult both the doctor and the dentist. Have an X-ray made of the teeth.

SICKNESS AND LABOR SHORTAGE.

By DR. HUGH S. CUMMING, Surgeon General of the United States
Public Health Service.

"Through the various relief societies, the people of America have been made pretty familiar with famine conditions in the Old World, but so far they have no idea of the havoc being wrought by diseases.

"To begin with, the man-power of the world is woefully short. The war casualties alone account for much of this, but in addition to the casualties in the various armies, influenza killed off several more millions. There is hardly any place in the world that escaped the epidemic of 1918-19. Thus we have these two causes responsible for an enormous shortage in world labor. We may still add to this the effect of epidemic diseases that are even now sweeping through Asia and eastern and central Europe, regions where in normal times large quantities of raw materials and foods are produced.

"Unfortunately there are no reliable statistics available for the countries which appear to be suffering most, but we may make some comparisons which are illustrative. In the United States in a normal year, for each person gainfully employed there is a loss of nine days due to sickness, a large part of it being preventable. There were approximately 290,000 deaths from pneumonia in the United States in 1918. For every death from pneumonia in the United States we count 125 sick days. There were over 13,000 deaths from typhoid fever. A death from typhoid fever corresponds to a loss

of from 450 to 500 sick days. There were over 150,000 deaths from tuberculosis. A death from tuberculosis corresponds to slightly more than 500 sick days among whites and slightly less than this among colored. While it is true that these are diseases in which the death rates are high, that is not the chief factor in causing the high economic loss. Malaria fever very well illustrates the economic loss to the world due to a disease in which the mortality rate is low. Although conservative estimates place the number of cases of malaria fever in the United States at above 7,000,000 cases annually, the death rate gives no indication of this high prevalence. Yet each case of malaria fever represents a loss of several working days and a continued lowering of efficiency. If we could eradicate this malaria in the South, and other preventable diseases throughout the nation, the increased efficiency in man-power would far more than offset the loss to the United States due to the war and the influenza epidemic

"We know that in a number of countries of the Old World production has ceased, or become inadequate, as a result of disease. Large fertile areas have not been cultivated since the war, industries are idle, or practically so. In addition to this we are facing an extensive spread of pestilential diseases, yet these dangerous diseases can be controlled, for we know a great deal about them.

Altogether the economic loss is enormous. Typhus fever is spread by the body louse; bubonic plague by the flea-infested rat; malaria fever is spread by a mosquito.

"In the tropical countries malaria is more prevalent than it is in the southern part of the United States. It is also more deadly. In some of the West Indies malaria causes one-fifth of the total deaths. The work at Panama and elsewhere has demonstrated how completely malaria can be controlled by properly conducted sanitary operations.

"A careful survey made some years ago in the Philippines convinced experts that the efficiency of labor would be increased 30 per cent by the eradication of hookworm disease. This is fairly indicative of conditions in some other sections of the world where there is a considerable amount of hookworm. The disease is spread by improper disposal of human excreta, and can be controlled and eradicated if health officers can be properly supported in their work.

"In 1917 in British India there were 267,002 deaths from cholera, 62,277 from smallpox, 437,036 from plague and 4,555,221 from 'fevers', a large portion of which were due to malaria. All of these diseases named here are preventable. The disease condition is probably as bad today as it was in 1917.

"It would take no stretch of the imagination to figure the economic saving to the world if these preventable diseases could feel the force of a joint attack from the nations of the world. Possibly no single factor would help more to restore the world to a normal basis.

"But there is another and more important reason why this world disease situation should concern the United States. We must be constantly alert to prevent some of these highly communicable diseases reaching this country. The typhus fever that is raging in Asia and eastern Europe is filtering through into western Europe. It will require the exercise of every precaution to prevent it becoming epidemic in some of the European nations. If that should occur it would be a gigantic task to keep it from reaching the United States.

"Even more dangerous, because more infectious, is the spread from one European port to another of bubonic plague. During the past few years plague has gradually invaded one Mediterranean port after another, so that at present there is probably no important port in that sea which does not harbor plague infection. This is really a very serious situation in view of the great increase in commerce which the United States will soon be carrying on with all the European ports. We face a trying situation and need to maintain our defensive machinery in the best possible condition. In addition to the regular quarantine officers at the various ports in the United States, the U. S. Public Health Service is now maintaining a number of experienced quarantine officers in various points in Europe, in order to keep a close watch on all of the diseases and keep the Service advised."

SWAT THE FLY!

WHOOPIING COUGH.

At present, whooping cough has again become unusually prevalent in our city.

Too many parents, unfortunately, still consider whooping cough a negligible disease.

The State Board of Health lists whooping cough among the dangerous communicable diseases, and properly so. Last year there occurred twenty-two deaths from whooping cough, which is more than the combined deaths from typhoid fever and measles, and as many deaths as we have had from scarlet fever.

This death rate would even appear larger if all the deaths from the complications of whooping cough were listed as whooping cough deaths.

All cases of whooping cough should have the attention of a physician and should be reported promptly to the Health Department, as required by law.

The following discussion of whooping cough is furnished by the U. S. Public Health Service:

Whooping cough is a contagious disease characterized by an inflammation of the nose, throat, and bronchial tubes, associated with a peculiar spasmodic cough, ending in a long-drawn-out inspiration accompanied by a sound known as the "whoop," from which the disease gets its name.

It is caused by a germ present in the discharges from the nose and throat, which is disseminated through the air during the spells of coughing. Most cases occur before the tenth year, and one attack is usually protective for the rest of life.

It is believed that girls are more liable to contract the disease than boys.

The incubation period is from 4 to 14 days. In the beginning the symptoms are like those of a severe cold. There is redness of the lining membrane of the nose and throat, profuse discharge from this membrane, and a hoarse, dry cough. The face is swollen, the eyes suffused and watery, the eyelids swollen and pink in color. The cough is severe and out of all proportion to the other physical signs. There is fever, but the temperature does not, as a rule, remain above normal after the first few days. After these symptoms have existed for 10 days or 2 weeks the cough changes in character. It occurs in paroxysms which consist of a number of short, quick coughs, followed by a long-drawn-out inhalation of air accompanied by the noise known as the whoop. The coughing spell often terminates with vomiting.

Inflammation of the kidneys may be present, and the child generally loses fat and presents a run-down appearance. Consumption not infrequently follows an attack of this disease, and great care should be taken to prevent a child suffering from whooping cough from coming in contact with consumptives. The exhaustion caused by whooping cough makes it more liable to contract consumption.

As patients continue to spread infection six weeks after recovery, it is very difficult to control the spread of whooping cough. As, however, it is such a distressing disease, every effort should be made to keep well

children from associating with those having the disease. Children with the disease should be allowed to go outdoors, but should not be permitted to go to school or to moving-picture shows or ride in street cars or in any public vehicle where they may come in contact with other children.

An outdoor life during the course of the disease should be encouraged.

Children in cities, on account of dust and the presence of harmful gases in the atmosphere, suffer more than children in the country. The child should gargle his throat several times a day with a solution of hydrogen peroxide (hydrogen peroxide, 1 part; water, 3 parts). A broad bandage placed tightly around the chest and stomach may make the patient feel more comfortable.

TEA, COFFEE, AND COCOA.

From "Hygiene and Sanitation"—Egbert.

As beverages, tea, coffee, and cocoa supply fluid for the system and that stimulation of the assimilative functions that causes a sense of comfort after their use, cocoa and chocolate having also the advantage of supplying some food. But these beverages may all be abused in their use as readily as may beef-tea or alcohol, and "tea-drunkards" and "coffee-drunkards" are not uncommon in hospitals and in private life. The teacup is not always the one that "cheers but does not inebriate." Women especially who drink much tea are apt to be nervous and dyspeptic, to have the "tea-drinker's heart," and to suffer from headaches and neuralgias. They depend upon tea to take the place of nutriment, and soon use up what little store of force they may have had, since they fail to replenish it with fuel-food. Men are more addicted to the use and abuse of coffee, and often manifest symptoms directly traceable to

such intemperance. While caffeine increases heart action, and may be used to advantage in cases of cardiac debility, for the same reason it should be taken with caution and in moderation where the cardiac action is already too vigorous.

It is interesting to note that among all nervous, energetic people the use of some one or other of these stimulant beverages is common, and that "total abstainers" from alcohol seem instinctively to resort to tea or coffee. And while it is probably theoretically true that the healthy person would better abstain entirely from the use of stimulants except in emergencies or at rare intervals, yet the almost universal desire for and use of them probably indicate that under our present high tension of living there is a real physiological demand and need for them that perhaps should be satisfied in a measure, but with moderation and judgment.

Beware bootleg liquor, warns the United States Public Health Service, for much of it contains wood alcohol and other poisons. An ordinary swallow of wood alcohol may produce death or blindness. Don't Risk It

Hard, Bulky, and Uncooked Foods.

FROM "HOW TO LIVE."

Hard foods, that is, foods that resist the pressure of the teeth, like crusts, toast, hard biscuits or crackers, hard fruits, fibrous vegetables and nuts, are an extremely important feature of a hygienic diet. Hard foods require chewing. This exercises and so preserves the teeth, and insures the flow of saliva and gastric juice. If the food is not only hard, but also dry, it still further invites the flow of saliva. Stale and crusty bread is preferable to soft bread and rolls on which so many people insist. The Igorots of the Philippines have perfect teeth so long as they live on hard, coarse foods. But civilization ruins their teeth when they change to our soft foods.

Most of the ordinary foods lack bulk; they are too concentrated. For this purpose it is found that we need daily, at the very least, an ounce of cellulose, or "woody fiber." This is contained in largest measure in fibrous fruits and vegetables—lettuce, celery, spinach, asparagus, cabbage, cauliflower, corn, beets, onions, parsnips, squash, pumpkins, tomatoes, cucumbers, berries, etc.

Until recently would-be food reformers have made the mistake of seeking to secure concentrated dietaries, especially for army rations. It was this tendency that caused Kipling to say, "Compressed vegetables and meat biscuits may be nourishing but what Tommy Atkins needs is bulk in his inside."

Cooking is an important art; but some foods when cooked lose certain small components called vitamins, which are also found in the skin or coating of grains, especially rice, also in yolk of egg, raw milk, fresh fruit, and fresh vegetables, especially peas and beans. These vitamins are very important to the well-being of the body. Their absence is probably responsible for certain diseases, such as beriberi, scurvy, and possibly pellagra, as well as much ill health of a less definite sort. Some raw or uncooked foods, therefore, such as lettuce or tomatoes, celery, fruits, nuts, and milk, should be used in order to supply these minute and as yet not well-understood substances which are destroyed by the prolonged cooking at high temperatures which is employed in order to sterilize canned foods. They are also diminished by ordinary cooking.

In addition to protein, fat, carbohydrate, and vitamins, there are other elements which the body requires to maintain chemical equilibrium, and for the proper maintenance of organic functions. These are the fruit and vegetable acids and inorganic salts, especially lime, phosphorus, and iron. These substances are usually supplied, in ample amounts, in a mixed diet, containing a variety of fruits and vegetables and an adequate amount of milk and cream. Potatoes are especially valuable because of their alkalinity.

The kitchen is the most important room in the house from a health standpoint.

DON'T MAKE YOUR OWN DIAGNOSIS.

BY JOHN P. KOEHLER, M. D., Deputy Commissioner of Health.

There are many homes that are attempting to replace the family physician with a family medical book. A family medical book costs only about \$10.00, may be consulted day or night and lasts a life time, which of course makes a strong appeal in these times of H. C. L.

We have nothing to say against medical books written for the use of the laity, because they are usually well written and comparatively accurate.

We do oppose the use of these books, however, for the reason that they cannot be used intelligently by people having no medical education.

It is just as dangerous for an untrained person to hunt disease by means of a home medical book as it would be for a five year old child to go duck hunting with a double-barrel shot gun. In both cases, the weapon may be alright, but the hunter is not qualified to use it intelligently. Just the other night, a man consulted me, who had been using his home medical book for two years. He did not come to me for diagnosis, but for treatment. He had already with the assistance of his medical book made his own diagnosis. He told me that he had gravel or renal calculi, which he had been passing from his left kidney into the bladder for almost two years. When I asked him what made him think that he had gravel,

he said he had all of the symptoms of such an ailment. He claimed to have pain on the left side very frequently, more often evenings, after a hard day's work.

Usually when he had pain he noticed a lump at the seat of the pain, which he believed was due to the fact that the stone clogged up the outlet of the urine and in that way distended something (he did not know just what) that caused the pain and also the bulging. Many times when he had the pain and felt the lump, he would get relief by using a hot water bottle. This he thought was due to the fact that the hot water bottle helped to dissolve the stone. He had taken all kinds of advertised drugs for renal calculi, but got no permanent relief, so he finally decided to consult a physician. Upon questioning him more closely, I was almost positive that his trouble was not due to gravel, but to a rupture or hernia. Upon examination I found my suspicion verified, because his trouble was caused by a left ventral hernia.

To the uninitiated it does not seem possible that anyone could make as big a mistake as this man did, but to the medical man it is an every day occurrence.

Treat yourself if you wish, but let your doctor first make the diagnosis.

Walk a mile each day to keep the doctor away, advises the United States Public Health Service. Try walking to work every morning and see if it doesn't make you younger and healthier.

THE BOX LUNCH.

Through the courtesy of the Red Cross, the Milwaukee Health Department has secured the services of a trained dietitian, Mrs. Philip P. Edwards, who is devoting herself especially to the problem of the undernourished child in the nutritional clinics of the Health Department.

In order that as many as possible may have the benefit of Mrs. Edwards' service, we have made arrangements to have her also offer from time to time, practical food talks of general interest.

The first of these on "The Box Lunch" is presented herewith.

A very important part of a clean and appetizing lunch box is the oil paper used to wrap the different articles of food in separate packages. This keeps the moist foods moist, and the dry foods, dry, as well as prevents the odor of one food mixing with that of another.

Whenever possible, a hot dish, such as baked beans, macaroni and cheese or even a beverage should be provided at or near the place where the lunch is eaten, to supplement it and also aid digestion.

Sandwiches are the chief food in the box lunch because they are easy to make, to carry, and everybody, almost, likes them. There are many different kinds of fillings which may be spread on thinly sliced buttered bread. For instance:

1. Chopped boiled egg.
2. Cheese, sliced or creamed.
3. Cold sliced meat.
4. Sardine.

5. Lettuce.
6. Raisin.
7. Peanut butter.
8. Jelly or jam.
9. Banana.
10. Brown sugar.

Fruit is a wise addition to the lunch and is much easier to pack and carry than the same amount of vegetable, which would serve the same purpose in the meal. It also furnishes moisture which is pleasant when eating the rather dry sandwich. The whole fresh fruit may be used or, if a suitable container, such as a paper cup, can be obtained, stewed fruit can be taken. A few well washed raw prunes, dates, or raisins fit well in the corners and little spaces in the box.

Sweets should not be forgotten. A piece of gingerbread, cake or sweet chocolate will be enough, or a few cookies, or a small amount of good candy. If a convenient cup is possible to carry, it may contain a custard or other pudding.

Liquid is desirable but not absolutely essential. Water is almost always handy, but if milk is drunk instead it will give more food.

The lunch should not be eaten rapidly any more than other meals. Enough time at the noon hour should be taken to thoroughly chew the food and for a few minutes at least for exercise in the open air.

After that, you will be surprised how much better the afternoon will go.

NUTRITIONAL CLASSES.

The nutritional clinics conducted in 20 public and parochial schools during the last six weeks have on the whole given very satisfactory results.

Out of 1,135 children regularly enrolled, 872 gained in weight, 263 lost, 684 made more than the average gain for the six weeks. The average gain per child for all of the children was $1\frac{1}{3}$ pounds. The average gain per child for normal children of the same ages and for the same length of time is 12 ounces. From this it is seen that the children in the nutritional classes have gained almost twice as much as other children. Four children reached their normal weight. This does not appear to be

many, unless one stops to remember that these children were all 10% or more under weight. The greatest gain for the six weeks was $12\frac{1}{4}$ pounds. The greatest gain for one week was 7 pounds.

The Detroit Street School had 76% of its children make more than an average gain. Hopkins Street School had $71\frac{1}{4}\%$ of its children make more than an average gain. Children in the Detroit Street and Cold Spring Avenue Schools made an average gain of 2 pounds per child. The children in the Fifth Avenue, Lee Street and St. Josaphat's Schools did not gain so well on account of successful vaccinations which were made necessary by smallpox in these schools.



FIRST AID TO THE INJURED



In Case of Accident.

Send someone for a doctor.

Inform the foreman of the shop or the superintendent of the plant; in the street, the nearest policeman or police headquarters should be notified.

Tight collars or belts should be loosened. The person should be kept in a recumbent or semirecumbent position. If the face is pale, lower the head and have the person lie horizontally. If the face is flushed the head may be raised on a folded coat, blanket, or other suitable material. If vomiting occurs, turn the head to one side so that the vomited

matter will run out of the mouth and not flow down the windpipe, which may cause choking, and later, on inspiration, pneumonia. Do not attempt to force unconscious persons to drink water or stimulants, as they can not swallow.

In removing a coat or shirt to determine the amount of injury, take the clothing off of the sound side first, and then it can be more easily removed from the affected part. This will avoid the danger of disturbing a fracture. It is sometimes advisable to cut the clothing off. In such a case cut along a seam or rip up a seam. Always cut the clothing when

it is necessary to examine a badly injured or crushed limb.

In removing the clothing have a due regard for the proprieties and do not expose the patient unnecessarily.

Always check serious hemorrhage before doing anything else. Put some sort of a dressing on a compound fracture before applying splints. Treat shock before dressing extensive burns. Be prepared to improvise headrests, tourniquets, splints, dressings, and stretchers out of material available.

All wounds should be covered promptly with some sterile material, or if that can not be obtained the wound should be exposed to the air and the clothing fastened back out of the way, so that it will not rub against the wound or all over it.

In severe injuries always examine for shock and administer suitable remedies if symptoms of shock are present. In this connection remember that keeping an injured person warm is of great importance, even though he is not in shock. It is a general rule in first-aid work to keep the head cool and the feet warm.

Always see that the patient has sufficient air. Keep the crowd back and do not permit the curious or overzealous to disturb the patient. Objectionable bystanders who are needlessly exciting the sufferer can often be gotten rid of by sending them on errands, even if the errand is unnecessary.

A cheerful and hopeful attitude on the part of the assistants or bystanders is always beneficial to an injured person. Don't dwell on the accident or tell the patient how seriously he is hurt, but proceed quietly to do what is necessary without unnecessary consultation or discussion with the patient. If the person is conscious, however, in every instance, ask him if he desires your assistance before undertaking to administer first aid.

Sometimes witnesses of accidents hesitate to go to the assistance of an injured person because they become sick or nauseated at the sight of blood. This feeling can generally be overcome by keeping busy and having the mind occupied with relief measures rather than dwelling on the horrors of the accident. Standing idly by an injured person may make even an experienced surgeon feel squeamish, but the moment he starts to work the feeling disappears.

In all cases of accident it seems hardly necessary to say that the one, who is rendering assistance should absolutely retain his self-control and not give away to panic. Knowledge of what to do in such emergencies is of material aid in keeping one's self-possession. Such information may be obtained by a careful study of any of the books on first aid now available.

U. S. P. H. S.

A very sore throat is a danger signal, says the United States Public Health Service, and may indicate some acute, infectious disease, such as diphtheria or scarlet fever. Take no chances. Have a physician make an immediate examination. A few hours delay may cause death.

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.

Sixth floor City Hall:

Executive or General Offices.

Child Welfare Division.

Vital Statistics Division.

Sanitary Inspection Division. Eighth Floor:

Food Inspection Division.

Venereal Disease Bureau.

Communicable Disease Division.

Medical School Inspection Division.

Bacteriological Laboratory.

Chemical Laboratory.

Tuberculosis Division.

Nursing Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.

Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY, MARQUETTE MEDICAL SCHOOL, 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

North Ave. Station, 2918 North Ave.—Wednesday, 2:30 to 3:30 P. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HEALTH BRIEFS.

Boil the Water.

Every fly killed now will be worth thousands in the summer. Swat the fly!

The Bureau of Venereal Diseases has examined and given treatment to 437 cases since January 15th, 1920, when this service was established.

Two hundred and fifty-five cases of whooping cough were reported during the month of March, with three deaths. This is considerably above the normal.

Two cases of wood alcohol poisoning reported recently give warning that wood alcohol is as poisonous today as it ever was. Don't take a chance!

Another death as the result from burns received from the use of stove polish containing benzene, has induced the Health Department to ask for an ordinance prohibiting the sale of stove polish containing inflammable or explosive ingredients.

The first class—61 women—taking the Health Department's course in First Aid and Home Care of the Sick, has just completed its course. A second class is well under way, and two new classes are now forming. This is a practical course consisting largely of demonstrations. Registration for the course can be made through the Nursing Division, Health Department, City Hall.

FIRST AID
AND
Home Care of the Sick
FREE COURSE
—OF—
INSTRUCTION



— CALL —

Milwaukee Health Department

CITY HALL

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MAY 24 1920

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

MAY 1920.

Vol. 10, No. 5.

*SANITATION is merely
another term for Clean-
liness.*



THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

JOHN P. KOEHLER, M. D., Deputy Commissioner.

GEORGE E. ADAMS.....Vital Statistics
GEO. P. BARTH.....School Hygiene
F. E. CHURCH.....Bacteriology
RUSSELL W. CUNLIFFE.....Chemistry
GEORGE R. ERNST, M. D.....Tuberculosis
C. J. KENNEY, M. D.....Contagious Diseases

E. T. LOBEDAN, M. D.....Child Welfare
AGNES J. MARTIN, R. N., Superv. of Nurses
WM. J. McKILLIP, M. D., Venereal Disease
STANLEY L. PILGRIM, M. D. C.,
.....Food Hygiene
T. F. THOMSON, M. D.....Sanitation

ORDINANCES YOU OUGHT TO KNOW.

Throwing Filth, Rubbish or Nauseous Substances on Streets, Etc.

Section 865. It is hereby made unlawful for any person, firm, or corporation, or for any officer, member, agent, servant or employe of any firm or corporation to place, throw or leave any slops, dirty water or other liquid of offensive smell, or otherwise nauseous or unwholesome, or any dead carcass, carrion, meat, fish, entrails, manure or other nauseous or unwholesome matter or substance, or any rubbish, ashes, paper, dirt, stones, bricks, manure, tin cans, boxes, barrels, or other substances whatsoever, or to circulate or distribute any circular, hand bills, cards, posters, dodgers or other printed or advertising matter, in or upon any sidewalk, street, alley, wharf, boat landing, dock or other public place, park or ground, within the city of Milwaukee. Provided, however, that this section shall not apply to any garbage, manure, ash boxes or receptacles, which are built and maintained not less than twelve inches above the grade of the alley, nor more than three feet from the line of any lot or parcel of land abutting upon any alley in said city. Said boxes so built and maintained shall be waterproof, and shall at all times

be kept securely covered except when depositing or removing the contents therefrom.

Receptacles for Ashes, Rubbish, Etc.

Section 866. It shall likewise be unlawful for any person, firm or corporation, or for any officer, member, agent, servant or employe of any firm or corporation, to place, deposit, throw, keep, permit or maintain any rubbish, ashes, paper or manure in or upon any lot, yard, block or enclosure within the city of Milwaukee, unless the same shall be securely enclosed and safely covered in a box, bin, can or barrel.

Penalty.

Section 867. Every person, firm, or corporation, and every officer, member, agent, servant or employe of any firm or corporation who shall violate any provision of sections 866 and 867, shall, on conviction thereof, be punished by a fine of not less than one dollar, nor more than fifty dollars, together with the costs of the actions; and in default of payment thereof shall be imprisoned in the house of correction of Milwaukee county for not less than thirty days nor more than ninety days, in the discretion of the court.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

MAY 1920

KEEP THE CITY CLEAN.

BY GEO. C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

The week of May 17th has been selected by the city departments for this year's clean-up drive.

For each day of that week a certain number of wards will be selected, in which the Street Cleaning Bureau will undertake an intensive clean-up drive until the entire city has been gone through.

This, of course, does not mean that in a single week the clean-up needs in the city will be satisfied.

Keeping the city clean of necessity means work the year around. The reason for the special drive is in that, with the spring house cleaning and moving, an extra amount of rubbish and waste material is thrown out by the average household. Unless promptly collected, this rubbish soon gets to litter up streets and alleys, and makes the city unsightly.

Every householder should, therefore, co-operate with the Street Cleaning Bureau so that this department can carry out its work in the most efficient manner.

To keep the city clean, safe, and presentable, is a civic duty in which every good citizen should be glad to assist.

Cities, like individuals, are judged largely by their appearance. Tourists will not stop in a city that looks dirty and neglected; business men will not locate there; people will not care to live in such a city.

Do your share, therefore, in keeping the city safe and fit. Start today. Rid your home of all rubbish from cellar to garret. Rubbish accumulations mean fire hazards. White-wash within and paint without will not only add to the presentability and cleanliness of your home, they will preserve it as well.

Do not neglect the front and back yard. Keep them free from old bottles, tin cans, old shoes, and similar unsightly trash. Trim the lawn. Repair fences and walks. See that ash receptacle and garbage can are provided, and are properly covered as required by law.

Start a garden; dig in it for health; grow something for the table. Plant flowers, shrubs and trees.

To keep your property spick and span will do a great deal towards making your neighbor do so likewise. Set your neighbor a good example. It will enhance the value of your property; it will improve the neighborhood.

Do not forget the city at large, its parks, its streets, its public places. Some people who are particular enough where their own property is concerned, do not care much where someone else's property, or the city at large comes into consideration.

Paper and boxes thrown carelessly into the streets or on the lawn of public parks is still a nuisance all too common; so is the practice of throwing slops and sweepings, bottles, tin cans, and innumerable things that are no longer wanted, into the street or wherever it seems convenient.

The law forbids this. It should be

unnecessary to need laws to curb such an objectionable practice. Ordinary decency will not do such thing.

Do your share to keep the city clean. Help make Milwaukee the safest and most attractive city to live in.

CLEAN UP! PAINT UP!

JOHN P. KOEHLER, M. D., *Deputy Commissioner.*

Every Spring nearly all cities have what they call a "Clean Up!—Paint Up!" week. During that week, basements, back yards, alleys and streets are cleaned by the removal of all rubbish and whatever needs painting is supposed to be painted. This is a very good campaign to have every year, although it would be much better if we cleaned up and painted up during the entire year, so that such a week would not be necessary.

There are some children like cities that clean up once in a while. They clean their finger nails, brush their teeth and take a bath only when there is a special campaign on in school, instead of doing it daily so that such campaigns are not necessary. There are many children, and especially girls, that paint up more than they clean up. Many times if one cleans well, it is not necessary to paint. This doesn't mean that we don't believe in painting, for we do. No one enjoys seeing girls with round, rosy cheeks and a clear, healthy complexion more than we do. However, there is a big difference in

paints. We believe in using paints that will not wash off. Even when you paint a house, you will use paints that will stay on several years. Why, then, use paints on your face that will not even last a day? You will perhaps say that you use only "vegetable paints" which are harmless. We know of vegetable paints that not only are harmless, but also are beneficial. Try some of the following vegetables internally and watch the color come to your cheeks: Potatoes, beets, carrots, string beans, cauliflower, spinach, celery, asparagus, boiled onions, parsnips, squash and oyster plant. Mix with these vegetable paints,—or rather painters, because they paint your cheeks—plenty of fresh air night and day, ten hours of sleep and provide yourself with a good set of teeth, to do the mixing and tell your older sister that you will no longer need to use her powders and paints, because you are going to paint up in the regular way, and this is by doing everything that will make you pretty because you are healthy, and not because you are painted.

AVOID MONOTONY IN FOOD.

GEO. F. BUTLER, *A. M., M. D.*

Some years ago, a mother came to me about her boy of thirteen who, she said, seemed to lack energy, was pale and thin and had no appetite. She was not particularly worried about him—in fact, would not have noticed that anything was the matter with him but for the criticisms of a grocer for whom the lad had gone to work during the school vacation and who told her that her son had no life in him and wasn't worth his salt around the store. To her, he seemed about as usual. Growing boys, she said, were always likely to be thin and listless, and she was unable to see that her Will was much different from other children of his age. When I said, the instant that I saw him, "Malnutrition!" she was inclined to feel indignant.

"Why," said she, "Will certainly gets enough to eat. I do not starve him."

Then I was obliged to explain, as every physician is so often compelled to do, that malnutrition may mean, not alone too little food, but also too much, as well as food of a wrong kind or too monotonous. I then found that the lad virtually lived on steak, potatoes, tapioca pudding, floating islands, and coffee. He ate these things and drank coffee because he liked them, and his mother permitted him to have all he wanted of them, because she loved him so; never dreaming that his low physical condition was a direct result of a monotonous diet. And she was sure that he did not eat too much of these

loved articles, for he often quit the table leaving a portion of his meal uneaten! And, although I urged the value of a proper diet with all the eloquence at my command, I could not impress convincingly upon this woman the absolute necessity of varying that boy's feeding. It was incomprehensible to her that what one eats matters much, so long as he has enough of it. Today, that boy is a fretful invalid of nineteen, looking like an old man—thin to emaciation, nearly bald-headed, pain-racked, almost helpless. And nothing in the world was the matter with him six years ago, but his daily diet. An easily effected change in the monotony of that would have assured him health and strength.

Although every practicing physician can not adduce an alarming number of cases as bad as this in his immediate vicinity, he can point to very many instances in which the effects of malnutrition are of the same kind, even if not extending to such an extreme; and I have selected this one as an illustration of the principles to be advocated here, because it accentuates a phase of domestic life that, in a greater or less degree, is present in all too many comfortable American homes—needlessly present and inevitably walking hand in hand with misery. This mother wished her son to take medicine. In her estimate, a mere change of food would not suffice. This was a grave and a typical mistake on her part. Not only could medicine not

serve the purpose; a change of food would have done so. It was no more a case for medicine than it was for civil law.

Medicine, indeed, has its great uses, but this was a matter of malnutrition, purely and simply; and, as an application of correct dietetic principles would have averted the ruin and made a man of that doomed lad, so today, in uncounted families

scattered over our land, there are men and women and children innocently dosing themselves with nauseous prescriptions for the alleviation of some complaint that no medicine ever could relieve, but which would respond either immediately or ultimately to some simple change of diet. For monotony of food is as bad for the stomach as monotony of scenery is for the eye.

CADETTE NURSES.

It is safe to say that the supply of the professionally trained nurse, or graduate nurse, as she is oftentimes called, will never be equal to the demand. Three years of training and the State Board examination, which are required of the professional nurse before she is able to obtain the coveted R. N., is a deterrent to many women who might otherwise consider entering the profession of nursing.

It is proper that the standards for the nursing profession be kept high, even if this results in keeping the number of nurses down.

There is, however, a place for less highly trained women in the care of sick, women who have received sufficient training to carry out orders under the supervision of a professional nurse. The term "practical nurse" or "cadette nurse" is applied to these.

In our own city we have a training school for just such nurses at the Bureau of Home Nursing, 808 Jackson street.

We bring herewith an outline of the course as furnished by Mrs. L.

M. Manegold, Secretary of the Society for the Care of the Sick, under whose supervision the school is conducted.

The six months' course given to the girls at the Bureau of Home Nursing consists of two months of lessons and lectures, two months of hospital experience at Beaver Dam or Waukesha, and two months in home nursing under supervision of the superintendent of the Bureau, Mrs. Frances Smith, R. N.

All students live at the school during their training. They buy foods, prepare and serve meals and are given practical instructions in house work. Graduates of this school are known as cadette nurses because they are supervised and instructed by a registered graduate nurse, and the steadily increasing number of calls on the bureau indicate the ready acceptance of its service.

The course of instruction comprises lectures on anatomy and physiology by Miss Goldstein of the Hebrew Relief Society and on materia medica and dietetics by the Superintendent, Mrs. Smith. Courses in lectures on

contagious diseases, hydrotherapy, obstetrics and surgery are arranged with physicians of Milwaukee.

Requirements for admission to the course at the Bureau of Home Nursing are an eighth grade education, perfect health, and the age of 20, although in exceptional cases girls of 18 are accepted. Most of the young women who enter training are from the smaller towns in the state, and appreciate to the utmost the opportunity to learn this work while living in a pleasant home under supervision and care of the officers of the school and the Society for the Care of the Sick.

That the work of the organization is appreciated by the medical fraternity is shown by the co-operation of the physicians of Milwaukee. The fact that the bureau does social service work and gives medical relief where needed, as well as does charity work, are strong in its favor. Calls for cadette nurses now come from the Visiting Nurses' Association, the Health Department, Infants' Hospital, the Out Patient Department,

Children's Hospital, industrial concerns and commercial organizations, as well as from private persons. During the first years of its existence, 161 physicians asked for cadettes from the Bureau of Home Nursing and this number has increased.

There is a very great need for nurses of this kind. This is shown by the above facts. The ideal future arrangements would be to have co-operation in the matter of supervising with those organizations that have graduate nurses doing home nursing service—like the Health Department and the Visiting Nurses' Association. The Bureau of Home Nursing has such tremendous possibilities, but the greater the success and the more cadette nurses that are sent out, the greater will be the need for graduate nurse supervision, so that co-operation will have to take place in the matter of supervision if this great work is to be carried on to the greatest extent of its possibilities.

CANCER NOT COMMUNICABLE

DR. C. J. KENNEY, *Epidemiologist.*

In reply to the numerous calls coming to the Health Department inquiring whether there is danger of contracting cancer by moving into a house where such a case previously existed, the Health Department can assure you that cancer is not contagious or infectious. Among the thousands of operations for cancer on record there is no report of a case acquired from the patient by any surgeon or nurse. Ordinary care and

cleanliness should be observed in attending cancer patients, but isolation as in the case of contagious diseases, is unnecessary.

Investigation of "cancer houses," "villages," or "streets," wherein an unusual number of cancer cases have been said to occur, has invariably shown that the apparently high mortality has been due to special conditions, such as an unusual proportion of old people, among whom the

cancer death-rate would naturally be high.

The American Society for the "Control of Cancer," sets forth the essential facts about cancer, in 14 points, published herewith:

(1) During the Great War the United States lost about 80,000 soldiers. During the same two years 180,000 people died of cancer in this country. Cancer is now killing one out of every ten persons over forty years of age.

(2) Many of these deaths are preventable, since cancer is frequently curable, if recognized and properly treated in its early stages.

(3) Cancer begins as a small local growth which can often be entirely removed by competent surgical treatment, or, in certain external forms, by using radium, X-ray or other methods.

(4) Cancer is not a constitutional or "blood" disease; there should be no thought of disgrace or of "hereditary taint" about it.

(5) Cancer is not a communicable disease. It is not possible to "catch" cancer from one who has it.

(6) Cancer is not inherited. It is not certain even that a tendency to the disease is inherited.

(7) The beginning of cancer is usually painless; for this reason its

insidious onset is frequently overlooked, and is easily neglected. Other danger signals must be recognized and competent medical advice obtained at once.

(8) Every persisting lump in the breast is a warning sign. All such lumps are by no means cancer, but even innocent tumors of the breast may turn into cancer if neglected.

(9) In women, continued unusual discharge or bleeding requires the immediate advice of a competent doctor.

(10) Any sore that does not heal, particularly about the mouth or tongue, is a danger signal.

(11) Persistent indigestion in middle life, with loss of weight and change of color, or with pain, vomiting, or diarrhea, call for thorough and competent medical advice as to the possibility of internal cancer.

(12) Radium is a useful and promising means of treatment for some kinds of cancer. No medicine will cure cancer.

(13) Open warfare by open discussion will mean the prevention of many needless deaths from cancer.

(14) The American Society for the "Control of Cancer" is always "on the job" with information and suggestions.

MEASLES.

During the month of April, 913 cases of measles were reported to the Health Department. This is considerably more than is normal for this disease.

Public indifference, which still regards measles as of no consequence, is responsible to a large extent for the spread of the disease.

Measles begins with symptoms that

are like those of a "cold". If the "ordinary cold" were given the attention that it should have, there would be fewer cases of measles.

Measles is not a negligible disease; the complications may be serious indeed; the average mortality for measles is 4%.

Report each case promptly to the Health Department.

EATING AFTER EXERCISE.

From "Personal Hygiene"—Pyle.

Physical exertion immediately before meals is likely to disturb digestion. Its effect upon the digestion is similar to that produced by mental fatigue. Singularly enough, this fact has not been universally recognized; and it is common for people who are physically exhausted from violent exercises to indulge themselves in a hearty meal without having previously rested. Most people understand that it is unsafe to undergo vigorous exercise directly after a meal; but they do not realize the mistake of eating heartily when too tired. These truths apply more to those who are untrained and unaccustomed to physical strain; but athletes have discovered that it is not wise to eat heartily when about to engage in great exertion. Flint found that during a period in which the Pedestrian Weston walked a total of 317 miles in 5 days, he consumed on an average about 3 oz. of proteids (meat, milk, fish, peas and

beans) daily. Yet in the diet of an ordinary farmer or mechanic in this country about 4 oz. of proteids are taken during 24 hours. Of course, other forms of food besides proteids are taken, and much energy is derived from the combustion of the carbohydrates (starch and sugar) and fats. As a rule, a well-trained man who is carrying on for a prolonged period unusual physical effort is able to eat and digest more food than the ordinary man. This disproportion between the nutriment taken and the energy expended may be approximately ascertained by noting the change in the weight of the body. A. P. Bryant states that Sandow's daily diet contains 8 oz. of proteids, which supplied 4,460 calories of energy. Under great physical strain more proteid is required than under conditions of normal exercises; but when the strain is to be short and severe it is wise to retrench at the table lest there should succeed rebellion in the stomach.

SOUP.

MRS. PHILIP P. EDWARDS.

Soup supplies a suitable, nourishing, and tasty form of food for people of all ages. Usually the first addition to the babies' regular milk diet is a broth or thin soup. As he is a little older, soup still should be one of the chief items in his day's meals. During the period of youth and manhood, he has a great variety of food and soup is often given a very

small place in comparison to the heavier foods. But as a person gets further along in years and not so much food is needed (and when perhaps the teeth are poor or missing) a good hot soup is most welcome.

Soups are divided into two classes, those made with meat and those made without meat. In the first class are the broths, which are made by

simply cooking the meat (beef) in water slowly a couple of hours and then straining and salting it. Several kinds and scraps of meat may be thrown into a kettle together with enough water to cover and simmered for several hours, then strained, and cooked rice, barley, farina, or many kinds of boiled vegetables added, with the water in which they were cooked. The other kind of soups, those made without meat, are milk or thickened soups. These are made by thoroughly cooking a vegetable, such as split peas, tomatoes, beans, corn, celery, onion, and then forcing it through a strainer. In the meantime, heat milk and thicken it with flour

and a fat cooked together, (using one level tablespoon of flour and the same of fat to each cup of milk). Add this milk mixture to the strained vegetable and heat both together. It must be remembered that all soups, except those given to babies and young children, should be well seasoned with salt and pepper and sometimes spices. Children's food should always be salted enough but their tastes should not be dulled by highly flavored dishes.

A hot soup is a great help to digestion and everyone, old or young, sick or well, should get into the habit of eating a bowl of soup every day.

A WORD ABOUT ATHLETICS.

GEORGE P. BARTH, *M. D., Dept. of School Hygiene.*

The time is again here when boys and girls will be called upon to defend and do honor to their school by winning from competing schools on track and field. Just a word about this.

Athletics properly and sanely followed will not harm the contestants.

The superiority of the Greeks and Romans depended largely upon the fact that physical perfection was held in high esteem and sought by all the populace, and games and sports were the order of the day. When luxury and love of ease prevailed, both nations went into rapid decline.

The restraint upon children necessarily imposed by school attendance is unnatural and should be tempered with periods of bodily activity in which all should participate in such manner and to such degree as their

physical health requires. Physical training, properly conducted, should include every boy and girl, normal or defective.

This physical education should permeate the entire educational system and should be as much a requirement for graduation as arithmetic and grammar. The tendency to expend all energies upon a chosen few who are already types of exceptional physical prowess should be combated.

Children should be classified in this branch as in other branches, the most reasonable classification being based on height and weight in the primary schools, and, in certain strenuous games, such as football, basketball, etc., where body clashes against body, in the secondary schools.

There is no reason why the curriculum should be different for boys and girls until they reach the age of

pubescence. At this period, however, a distinction should be made because the vastly different changes which occur in the two sexes during adolescence.

With the children graded by a competent physical instructor backed by adequate examinations by school physicians, competitions within the school could be staged at stated intervals and the results marked not by individual, but by group performances, the average performances of groups counting as winning scores.

From these groups should then be selected those who have shown particular ability in certain athletic events and these selected individuals should be properly trained and be pitted against similar selected individuals from other schools.

Each team would then be truly representative of the school. By this method, the physical standard of the entire personnel of the school would be brought to a higher rational standard rather than the production from material already fit, of a comparatively few specialists.

Now, as to athletic events. These should be graded strictly according to physical standards—age, development and physical condition. Because the two mile, the mile or the 880 is a standard event in Universities, is no reason why these should be on the card of events of high schools or grammar schools.

It is not the games themselves that are inherently harmful, but that indulgences are permitted by imma-

ture and improperly trained individuals whose ambitions out-strip their judgment and strength.

That nestor of athletic training, Mike Murphy, never attempted to train a boy under sixteen because he recognized that their muscles would not permit of it.

The adjustments which take place in the human body during the growing period are sufficiently violent in themselves, and to interfere by calling upon any of the organs for excessive exertion without proper preparation (training) is taking a chance with the future health and well-being of that body.

Opinion is divided on the bug-a-boo of athletic heart and athletic kidney.

There is little danger of either if athletes are properly selected and properly trained. At present, candidates for teams are called out at the beginning of the season for some particular game. They are soft and flabby from inactivity. An attempt is then made to get them into condition by intensive training in the few short weeks of that season. This is well-nigh impossible, and is harmful especially in growing children, and should be stopped.

By a system of compulsory physical education, children should be kept in partial training all the time. Preparation for contests would then merely consist in intensifying this training in the selected individuals. This is safe, and productive of no ill results.

Beauty is more than skin deep. Natural beauty is usually a sign of health that comes from keeping the body clean and getting plenty of outdoor exercise.

BANISH THE PARASITE.

THE RAT.

First Essentials in Eradication. Starve him, by using rat-proof receptacles for food, and covered metal garbage cans. Deprive him of breeding places, by abolishing planked yards and passageways. Refuse him admission to the comfort of your buildings, by rat-proof construction and screened basement openings, by killing him at every opportunity.

Traps. Place traps wherever rats are accustomed to come for feeding purposes and keep them more or less concealed. No food other than the bait should be available.

Poison. Use a preparation of arsenious acid or phosphorus, 10 per cent in suitable base, as cheese, meal, or glucose. Or use strychnine placed inside pieces of food. Plaster of Paris in the proportion of one part to two parts of flour may be used. Trapping is preferable to poisoning.

Naphthaline. The smell of naphthaline flakes is disagreeable to rats and mice, and they will not frequent places where it is kept.

Lime. In the early fall, fill anything that resembles a rat hole in the cellar with about a cup full of fresh lime. As a rule rats will not come into the cellar at all, as they have to scratch away the lime to secure an entrance, and the lime gets into their eyes, making them sore.

Rat-proofing. This is essentially to prevent infesting of buildings. It requires attention to the ground area, walls, ceilings, garret, roof, dead spaces in general, ventilators, abandoned sewers, doors, windows, outside piping, water and sewer

pipes, downspouts, wiring, and air or light shafts. Rat-proofing of floors is secured either by elevation of the structure with the underpinning open and free or by marginal walls of concrete, stone, or brick laid in cement mortar sunk two feet in the ground, fitting flush with the floor above. The wall must fit tightly to the flooring and not merely extend to the joist or supporting timbers, as this would allow open spaces for the entrance of rodents. Where foods are stored, concrete floors and foundation walls are imperative.

Double walls with a dead space between should be avoided, or if used should be rat-proofed at top and bottom with heavy wooden timbers, 4x4 joists, or by a concrete fill. Attics should be well opened and free of rubbish or other refuse favored by rats. Double ceiling should be avoided, especially in basements. Boxed-in structures, such as plumbing, kitchen sinks, and sundry similar arrangements, often furnish rat harborage. Such boxing should be removed. Miscellaneous openings, as light shafts, ventilators, and open windows, should be screened, preferably by 12-gauge wire screen with mesh not exceeding one-half inch. Abandoned sewers or drainpipes give access to rodents and should be protected.

The garbage can should be of metal, preferably galvanized iron, watertight and with closely fitting lid.

Caution. Poison for rats should never be placed in open or unsheltered places.—Exchange.

 FIRST AID TO THE INJURED **GAS POISONING.**

Gas poisoning is a frequent accident, especially in the larger cities and towns where gas is used for illumination purposes.

Firemen are frequently overcome from the effects of smoke and the products of combustion from wood, varnish and other materials in burning buildings.

By far the greater number of cases of suffocation due to gas in this country are caused by illuminating gas. Many persons use this method of committing suicide.

A gas burner should never be turned down low and allowed to burn all night in a room in which persons are sleeping, as the flame may be extinguished by a change in pressure or a slight draft and later the room become filled with gas. When going into burning buildings which are filled with smoke it is well to tie a cloth wet with water around the nose and mouth. As the air is generally purer near the floor than at the ceiling, the person should, if necessary, walk on the hands and knees or crawl on the floor. In entering a room or other place which is full of gas to remove a suffocated person take several deep breaths of pure air outside and spend as brief a time in the compartment as possible.

Preliminary signs of gas poisoning are headaches, dizziness, nausea, feeling of sleepiness and languor, and rapid pulse. In later stages when unconsciousness comes on, the face and hands are blue, heart action very rapid and weak, and breathing may be shallow or entirely suspended.

The patient should always be immediately removed to where the air is fresh and good. If he is only slightly affected, walk him up and down in the open air and give some effervescing drink, such as soda water, Weiss beer, or a teaspoonful of baking soda in a glass of water. This will cause belching of the gas and relief from nausea.

In more severe cases, when the patient is more or less unconscious but still breathing, sprinkle a few drops of ammonia water on a handkerchief and allow the patient to take one breath with this under his nose, once a minute. Rub the arms and legs briskly toward the heart to promote the circulation. If the patient is conscious enough to swallow, give one-half teaspoonful of aromatic spirits of ammonia in half a glass of water.

If breathing has ceased, begin artificial respiration at once, after loosening the collar or any tight clothing around the neck and chest. Have an assistant give whiffs of ammonia, as described above, and also rub the extremities toward the heart; but do not let these procedures interfere with the artificial respiration, which must be continued without interruption until the patient begins to breathe of his own accord in a regular manner.

The after treatment is rest in bed with appropriate stimulation. In severe cases the patient should be kept in bed until he has fully recovered, as dangerous symptoms have followed getting up too early.

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.

Sixth floor City Hall:	Communicable Disease Division.
Executive or General Offices.	Medical School Inspection Division.
Child Welfare Division.	Bacteriological Laboratory.
Vital Statistics Division.	Chemical Laboratory.
Sanitary Inspection Division.	Eighth Floor:
Food Inspection Division.	Tuberculosis Division.
Venereal Disease Bureau.	Nursing Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturady afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Tuesday and Friday mornings, and every afternoon from 1 to 4 o'clock for adults with the exception of Saturday.

Saturday morning, from 9 to 12, for children.

Thursday evenings, from 7 to 9 o'clock, for adults.

Saturday mornings, from 9 to 12 o'clock, for children.

NORTH SIDE DISPENSARY, MARQUETTE MEDICAL SCHOOL, 4TH ST. AND RESERVOIR AVE.

Wednesday morning, from 10 to 12 o'clock.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday, 9:30 to 10:30 A. M.

Park St. School, cor. Hanover St.—Monday, 2 to 3 P. M.

Hanover St. School, near Mitchell St.—Friday, 2 to 3 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 2 to 3 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

North Ave. Station, 2918 North Ave.—Wednesday, 2:30 to 3:30 P. M.

Clarke St. School, cor. Twenty-eighth St.—Wednesday, 2 to 3 P. M.

Brown St. School, cor. Twentieth St.—Monday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2 to 3 P. M.

St. Casimirs School, Clarke and Weil Sts.—Thursday, 2 to 3 P. M.

St. Hedwigs School, Brady and Franklin Sts.—Friday, 3 to 4 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2 to 3 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and Ninth Sts.—Wednesday, 2 to 3 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HEALTH BRIEFS.

A clean city means a more healthful city.

Vaccination against small pox was undertaken in nine schools; the total number of vaccinations for the month was 4,153.

The Division of Nurses, operating with forty-six nurses, totaled 13,727 inspections; the school physicians made 7,550 morning inspections, 4,171 physical examinations, and 1,139 school visits during the month of April.

The Bureau of Venereal Diseases reports 99 new cases for the month of April. Of these 73 were among men and 26 among women. The Bureau has now also extended its service to the North Side Substation on 29th and North Avenue. Clinics will be established also at the Sixth Ave. and Mitchell St. station as soon as the necessary remodeling can be done there.

With the exception of measles and whooping cough, the contagious disease situation has been favorable during the month of April. There were 4 cases of typhoid, 49 of small pox, 53 of diphtheria, and 109 of scarlet fever reported during the month, all of which are below the normal index.

Clean Up -- Paint Up Week

MAY 17-22, 1920

DO YOUR SHARE TO KEEP MILWAUKEE CLEAN

Work Systematically.

Follow This Outline.

Remove all rubbish from attic, cellar, closet, back yard, and areaway. Have it sorted as explained below.

Remove and clean all carpets and hangings for the summer.

Scrub floors, hallways and all unvarnished woodwork thoroughly.

Use plenty of soap and hot water. Clean all windows and keep them open to fresh air and sunlight.

Ventilate damp cellars. Screen windows and doors.

Paint or whitewash your buildings, bed-rooms, cellars, fences; paint and whitewash kill germs.

Put walks in first-class condition. Plant trees, shrubs and flowers in suitable places. Keep your lawn in good condition.

Exterminate dandelions; salt cracks in sidewalks.

Donate all salable junk to the Salvation Army; place broken glass, crockery, tin cans and other rubbish in boxes for collection along street curbs. Collections will be made by the Department of Public Works, according to the following schedule:

Monday, May 17.....	Wards 1, 2, 3, 4
Tuesday, May 18.....	Wards 5, 12, 17
Wednesday, May 19.....	Wards 8, 11, 14, 23, 24
Thursday, May 20.....	Wards 9, 10, 15, 16, 19
Friday, May 21.....	Wards 7, 20, 22, 25
Saturday, May 22.....	Wards 6, 13, 18, 21

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JUL 10 1920

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

JUNE 1920.

Vol. 10, No. 6.

*THERE ARE many troubles which
you cannot cure by the bible
or hymn book, but which you can
cure by systematic exercises and fresh
air.*

—HENRY WARD BEECHER.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

E. V. BRUMBAUGH, M. D., Deputy Commissioner.

GEORGE E. ADAMS.....Vital Statistics
GEO. P. BARTH.....School Hygiene
F. E. CHURCH.....Bacteriology
RUSSELL W. CUNLIFFE.....Chemistry
GEORGE R. ERNST, M. D.....Tuberculosis
C. J. KENNEY, M. D.....Contagious Diseases

E. T. LOBEDAN, M. D.....Child Welfare
AGNES J. MARTIN, R. N., Superv. of Nurses
WM. J. MCKILLIP, M. D., Venereal Disease
STANLEY L. PILGRIM, M. D. C.,
.....Food Hygiene
T. F. THOMSON, M. D.....Sanitation

LAWS YOU OUGHT TO KNOW.

Measles Including Rubella (Rotheln)

1. Cases must be reported to the local health officers within twenty-four hours.

2. Conspicuous placard on house.

3. Children who have measles are not permitted to leave the premises and all children other than members of the family shall not enter or remain upon the premises while the home is placarded. Children who have had measles may attend school from the home. Well children in family who have not had measles may return to school after fourteen days from date of last exposure, provided they take up their residence in another home.

4. There are no restrictions on the adult members of the family.

5. Thorough disinfection (not fumigation) of the infected rooms and contents after death or recovery of patient and before placard is removed.

Chicken Pox.

1. Cases must be reported to the local health officers within twenty-four hours.

2. Conspicuous placard on house.

3. Children who have chicken pox can not attend school or leave the premises. Children other than members of the family shall not enter or remain upon the premises while the home is placarded.

4. Fumigation not required. Well children may go to school.

EATING TO LIVE WELL

No one can have health who eats too much.

No one can have health who eats too often.

No one can have health who eats when tired, hurried, worried, anxious, or excited.

No one can have health who rises late, gulps down a hearty breakfast, swallows a sandwich and a glass of milk for lunch, and tops off the

whole performance with a late dinner.

When you have eaten, do not wonder if the food will agree with you. When you begin to wonder, trouble begins. If you fear it, do not eat it. If you eat it, do not fear it.

Be cheerful at your meals. A sour countenance will give you a sour stomach.—Good Health.

Bulletin of the Health Department

Published for the Citizen of
Milwaukee, Wis.

JUNE 1920

SMOKING AMONG BOYS.

BY GEO. C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

According to reports received by the Health Department, cigarette smoking is becoming more common among boys at high school, and it is said to be spreading even among the boys of the upper grades in the primary schools.

The reason for this epidemic of cigarette smoking among boys, in part at least, may be explained on the basis of hero worship. The cigarette, as the most popular "smoke," which was so abundantly supplied to our soldiers, undoubtedly has become symbolic of the swaggering hero himself in the eyes of the boys, who imagine that by imitating this one habit they themselves achieve all the dash, and swagger, and glory of the lately so much idolized sons of Mars.

Whether or not this theory is a correct explanation for the undoubted increase in the practice of cigarette smoking among boys, finally makes little difference. It is the fact that is to be faced, a fact that calls for action to curb this habit in the health interest of the misguided boys.

For the curbing of the habit, it seems necessary that the facts relating thereto should be clearly stated, that reason be appealed to, and intelligent cooperation be secured so far as that is possible.

We do not share the fanatical prejudice which some have concerning the use of tobacco, according to which, every smoker is to be branded as wicked and immoral, and the use of tobacco is to be prohibited by law. Such narrow-minded bigotry and overstatement cannot bring desirable results.

What, then, is to be said as to the use of tobacco?

When all is said and done, the use of tobacco is decidedly an unnatural and unnecessary practice, the risks of which—and there are real risks—are all on the side of the user of tobacco with none for him who avoids to use it.

Tobacco contains certain poisonous substances, some of them highly poisonous.

Granting that the adult may use tobacco with perhaps little or no injury to himself—though there are many who unquestionably would be better off in health as well as purse if they quit their relation with Lady Nicotine—it becomes, nevertheless, a very different matter to permit immature boys to indulge in the practice.

Every high school boy knows that cigarette smoking and athletics do not go well together. The records of our colleges show that the best achievements in athletics as well as

in scholarship invariably were attained by the non-smoker. Parents of boys of high school age will do well to think this matter over before they will consent to have their boys take up smoking.

The high school boy of real character will put off experimenting with tobacco until he is fully matured. Then, if he cares, let him try the experiment to find out whether it is really worth while. Of course, it takes a great deal more of grit, and nerve, and manhood, to say "no" when the rest of the boys are smoking. It is so much easier to follow the leadership of some bully; and, unfortunately, there seem to be

rather many boys in our high schools who are apparently without any strength of will and courage of conviction, who, like sheep, blindly follow some cheap, would-be smart, leader of the cigarette smoking variety.

As for that young scamp in short pants out of the primary school who picks his "smoke" from among the cast-off butts of his elders, it is, of course, useless to appeal to reason where there is none. The only treatment suited to his case is the forcible laying-on of parental hands whenever the evidence is against him.

FIGHT THE FLY.

It has been estimated that one female fly can produce in one month 506,250,000 offspring. Do not let these millions come into existence. Keep the first flies in early spring from breeding. A female fly lays 200 to 300 eggs in bunches deposited in manure piles, rubbish, fermenting kitchen waste, filth, etc. These eggs hatch into wormlike larvae called maggots in 24 hours. These maggots reach maturity in from 3 to 6 days, when they migrate or leave the substance where they commence their growth burrowing into the soil, or even traveling a distance of several feet over the ground. The third stage of the development of the fly is the pupal stage, the body of the maggot contracting it until it resembles a grain of wheat. This stage continues about three days, when the adult fly emerges from the sack.

The entire development of the fly from the egg to the adult fly consumes only 8 to 10 days, so that man-

ure, filth or garbage which has been exposed for a longer period than one week, is almost sure to breed flies. The removal, destroying or proper protection of breeding material will largely prevent the breeding of these insects.

Have a covered garbage can in which to put all garbage. Destroy all rubbish and filth on your premises. Have a covered fly-tight receptacle for manure or spray it with a solution of paris green and water; 1 ounce of paris green to 7 gallons of water.

14,000 people die from typhoid fever and 7,000 infants under two years from diarrhoea and enteritis annually in the United States. Flies by conveying the germs of these diseases from filth to your food are partly responsible for these deaths. Swat the first flies and prevent their breeding by eliminating all breeding places from your premises.

How to Cure Chronic Constipation.

By JOHN P. KOEHLER, M. D.

By far the most common ailment met with in the human race is constipation. It is prevalent at all ages, beginning during infancy and continuing throughout life.

The causes of constipation are so numerous and so complicated that we will not attempt to explain them at this time, but will devote our efforts to the treatment. There are very few people who do not know how to treat constipation, but there are many who do not know how to cure it. Anyone can advise laxative drugs, teas, enemas or suppositories, which may give temporary relief, but never cure constipation. Laxative drugs will, in nearly all cases, never cure constipation, but in most instances make it worse. Nothing should be done to produce an artificial evacuation of the intestinal tract unless there are other reasons than constipation. The best cure for constipation, when not accompanied by any symptoms of disease, is to let it alone. No one can state positively how frequently any individual should have a bowel movement, and it therefore becomes advisable to let nature do the regulating. Many times nature may need a little assistance from us, not by the use of drugs and mechanical methods, but by right living.

Right living consists of good habits. No one can eat foods that are constipating and expect to be relieved of constipation. Fine, smooth and concentrated foods must be supplemented with coarse and bulky

foods. Cooked foods as a rule are more constipating than raw foods. A little bran in bread, breakfast cereals or plain bran is the best food laxative we know of. A glass of hot water before retiring and before breakfast, gives some results. People leading a sedentary life should walk enough to stimulate their circulatory system. The intestines need good red blood to keep up their tonicity.

Last but not least, it is necessary to establish regular habits. A child a few months old can be trained to have an evacuation at a definite time each day. The tendency of today is to have time for everything else excepting to heed nature's calls. Children must be taught to stop playing and adults to stop working, whenever there is the least premonition of a bowel movement. Piece and premium work in factories, we are certain, encourage workers to postpone bowel action. We must also get away from this inexcusable false modesty. Many people, when away from home, are ashamed to ask where the bathroom or toilet room is, because they do not want to admit publicly that they are human enough to require such necessities. No matter how refined or cultured we may become, we will never be able to dispense with toilet facilities, and that being the case, why not admit it whenever necessary?

There are other things that must be done in some cases to relieve constipation, but in most cases, food, exercise, and habits will do the work.

A SMALL-POX PARTY.

By E. V. BRUMBAUGH, M. D., Deputy Commissioner of Health.

Before the days of vaccination, smallpox was a disease which ravaged the entire civilized world, and prevailed as commonly as does measles today. Practically everyone suffered from smallpox some time in his life. So common was it that when in Boston in the year 1772 an epidemic of smallpox broke out and ravaged the city, out of 15,684 people residing in Boston at that time, only 174 of those susceptible to the disease escaped infection.

Vaccination had not, at that time, been discovered, but there was known a process of inoculation as a prevention against smallpox. Inoculation which consisted in the deliberate and intentional infection of a person with genuine smallpox was introduced into Europe by Lady Mary Wortley Montague, the wife of the ambassador from the Court of England to the Sultan of Turkey. Lady Montague, while residing in Turkey with her husband, had observed the practice of inoculation among the Turks, and this practice was commonly observed by them. As she describes it, this constituted what I have called "a small-pox party."

At a certain favorable season of the year, the mothers of those children whom it was desired to protect against smallpox would congregate at some convenient place, frequently the home of one of these women. After such social amenities as might have seemed desirable, the inoculation of the children was then carried out by someone, usually an old lady,

who was especially skilled in the procedure. The skin of the children was bared and without any antiseptic preparation (for the practice of antisepsis was unknown in those days) the skin was scratched with a needle, thorn, or it is said, sometimes with the finger nails of the operator, until the blood was drawn. After this the virus from an actual existing case of smallpox was rubbed into the bleeding wounds of the children, and the operation was then considered complete.

This procedure was as much a social procedure as it was a health activity. It constituted an opportunity for the mothers to get together for conversation, a cup of coffee and the exchange of news and gossip. In due course of time, the children thus inoculated would develop a genuine smallpox, usually of a mild type, but upon recovering would thereafter be protected from a smallpox infection.

Seems cruel, brutal and horrible, doesn't it? And yet these mothers loved their children dearly—just as truly and earnestly and as deeply as do the parents of today. They were doing for their children the best that the teaching of their day permitted. They were trying to save their children from the horrible disfigurements of smallpox contracted in the ordinary way. They were trying to save their children from the hideous death that often resulted from the smallpox of their day, and they were doing this through only the best and highest motives and actuated by the deepest affection of their children.

Today, so dangerous a procedure is no longer necessary. The control of smallpox in the light of modern knowledge is easy, certain and accurate. The discovery of vaccination has placed a new weapon in the hands of the health officer, and no one now need suffer from smallpox, nor need anyone be exposed to the danger of intentional inoculation after the method of the "smallpox party". Vaccination is a simple, slight and safe operation. When carefully performed it causes little inconvenience to the person vaccinated, leaves no disfiguring scar. Indeed, to the sanitarian, the tiny marks which are the results of the

vaccination, are rather beauty marks than disfigurements.

Smallpox is increasing not only in Milwaukee, not only in the State of Wisconsin, but throughout the entire United States today. Vaccination should be repeated at least once in five years, in order to assure protection against the smallpox. The Milwaukee Health Department offers free vaccination to all who apply for it. Saturday morning from 10:00 to 12:00 has been set aside as a vaccination period when skilled vaccinators are on duty at the Health Department offices, and this service will be gladly extended to those who apply.

OUTDOOR LIVING.

The air of the best ventilated house is not as good as outdoor air. Those who spend much of their lives in the open enjoy the best health and the greatest longevity. It is a great advantage to go into camp in summer and to live in the country as much as possible.

Climate, of itself, is a secondary consideration. Not every one can choose the best climate in the world, and, after all, the main advantages of fresh air can be enjoyed in almost any locality. Even in a city, outdoor air is, under ordinary circumstances, wonderfully invigorating.

The common prejudice against damp air greatly exaggerates its evils. While moderate dryness of air is advantageous, it seems nevertheless true that to live in damp, even foggy, air out-of-doors is, in general, more healthful than to live shut up indoors.

Observations have shown that the

pupils in outdoor and open-window schools are not only kept more healthy but learn more quickly than those in the ordinary schools. It is even claimed that tuberculous children in an outdoor school may make more rapid progress in their studies than the more normal children in a badly ventilated school. Parents should insist on fresh air for their children when at school. They should also insist on outdoor playgrounds.

For themselves, also, they should not neglect outings, picnics, and visits to parks. Whenever practicable, outdoor recreation should be chosen in preference to indoor occupations, such as working on a farm, rather than in a factory. It would help solve some of the greatest problems of civilization, if, in consequence of an increased liking for outdoor life, larger numbers of our population should join the "back-to-the-farm" movement. Leaving the country for

the city is often disastrous even for the purpose in view, namely to gain wealth. For wealth gained at the expense of health always proves in

the end a bitter joke. The victim proceeds through the rest of his life to spend wealth in pursuit of health.

FROM "HOW TO LIVE."

ICE STATIONS.

The portable ice stations established by the Health Department in various sections of the city last summer, have proved so successful an experiment that the department has determined to enlarge their number this summer. Arrangements have accordingly been made for the establishment of thirty-seven of these ice stations.

Through the courtesy of the School Board, it has been made possible to again use school grounds for the majority of these stations. This will place the stations where they can be readily found, and will distribute them in more or less logical centers of population. Ice will be sold from these stations as last year, on the "Cash and Carry" basis. The rates for ice will be 40c per hundred pounds, which is 20c less than when sold from the wagon. The stations will be largely manned by senior students from colleges and technical schools, which will insure intelligent and courteous treatment to the public.

Ice has become quite an important necessity in our life during the summer months to keep food from spoiling, and particularly to keep food for infants in a sweet and wholesome condition. We, therefore, urge mothers to avail themselves of the opportunity offered through these ice stations to secure ice at a reasonable cost for the home.

We bring herewith, also, a descrip-

tion of a home made ice box, which any home can afford to construct for itself:

Get a wooden box at a grocery store, such as a soap box, 15 inches in depth. Buy a covered earthenware crock, tall enough to hold a quart bottle of milk. Also get a piece of oilcloth or linoleum about a foot wide and 3 feet long. Sew the ends together to make a cylinder which will fit loosely around the crock. Place the crock inside the oilcloth cylinder, and stand them in the center of the box. Now pack sawdust or excelsior beneath and all about them to keep the heat from getting in. Complete the refrigerator by nailing a Sunday newspaper or two other newspapers to the wooden cover of the box. It is now ready for use.

In the morning as soon as you receive the milk place it in the crock; crack 5 cents' worth of ice and place it about the milk bottle. Place the cover on the crock and the lid on the wooden box. No matter how hot the day has been, you will find some unmelted ice in the crock the next morning. Remove the crock every morning to pour off the melted ice.

The proper icing and cooling milk will be of material assistance in keeping babies from becoming sick, and will to that extent be a factor in lowering the infant mortality in this city.

LOOSING WEIGHT.

By E. V. BRUMBAUGH, M. D., Deputy Commissioner.

In the group of 1,139 children in the Health Department's nutritional clinics, 169 not only failed to gain, but show actual losses in weight. The reasons for such losses in weight are several. Perhaps the most important single reason is the condition of the teeth. The teeth constitute the apparatus by which the food is prepared for digestion. Food which is improperly prepared cannot be handled by the digestive organs to the best advantage. Teeth which are decayed, painful or surrounded by pus cannot function properly in preparing food for digestion.

When a farmer is expecting to buy a horse, he gives particular attention to the condition of the teeth of the animal, and will refuse to buy the horse that cannot properly chew its food. He recognizes in that case the importance of a proper equipment of the mouth with well functioning teeth. Yet an enormous proportion of the parents of children in our public schools never think of giving to the mouths of their children even a portion of the attention that every farmer devotes to the care of his live stock.

Neglected teeth often develop abscesses. The pus in these abscesses is absorbed by the body and one of the results of this constant absorption of pus is a general reduction of the body's vitality which may be manifested in the form of underweight. It is hopeless to try to restore children to their normal health as long as there continually remains in the body a focus that is ever at

work in opposition to the best efforts to build up bodily strength. The underlying condition must first be corrected.

The undernourished child needs rest. It needs more rest than does the child of normal nutrition—long hours of sleep with an abundance of fresh air. Such a child should be relieved of unusual or exhausting home and school duties. It should be in bed certainly at nine o'clock, and it should not have obligations which demand unusually early rising, particularly such duties as the carrying of papers in the morning, but should be allowed to sleep nine, ten, or even eleven hours.

The undernourished child ought not to be required to take on additional home work or home instruction that will throw an increased demand upon its nervous energy, such as the taking of music lessons, dancing lessons, language lessons or heavy home study, frequent attendance upon moving pictures, and especially of the exciting type. All increase the drain of nervous energy and prevent quiet which is indispensable for a restoration to normal condition.

The habit of eating between meals, and particularly the eating of ice cream cones, sundaes and sodas, chocolate bars, peanuts, cracker-jack, and candies likewise destroys the appetite of the child for the substantial and tissue building foods which are indispensable for his growth and development.

EIGHT HOUR DAY.

The eight hour day is not only more efficient than the 10 hour day in industrial plants, but is more economical.

This is the conclusion reached by experts of the United States Public Health Service after a careful detailed study of conditions and production in standard factories of both classes, which has been under way since 1917.

The plants surveyed were selected after a great deal of care. Each is a modern factory, employing such a large number of workers as to make any conclusions reached apply to industry in general. The other consideration was that the machinery, manufactured product and processes in the 10 hour plant should be sufficiently similar to the eight hour plant to make a fair comparison.

The advantages are all in favor of eight hour days, or shifts, as compared with the 10 hour day, and relate to maintenance of output, to lost time and to industrial accidents.

Here are the main conclusions summarized:

Maintenance of Output: The outstanding feature of the eight hour day is steady maintenance of output. The outstanding feature of the 10 hour system is the decline of output.

Lost Time: Under the eight hour system work with almost full power begins and ends approximately on schedule, and lost time is reduced to a minimum. Under the 10 hour system work ceases regularly before the end of the spell and lost time is frequent.

Stereotyped Output: Under the 10 hour system the laborers seem to artificially restrict their efforts and to keep pace with the less efficient workers. Under the eight hour day the output varies more nearly according to the individual capacity of the laborer. That is, each is more likely to do his utmost, rather than an "average day's work," regulated by a low standard.

Industrial Accidents: This phase of the study is of particular interest. Ordinarily accidents may be expected to vary directly with speed of production, owing to increased exposure to risk. But when fatigue is taken into consideration there is a marked modification of this rule. When there is a reduction of output due to fatigue there is a rise in the number of accidents; that is, in the last hours of the 10 or 12 hour day, in spite of employees slowing up in work, more accidents occur. If for any reason production is speeded up in the last hours, when the laborers are fatigued, the rise in the number of accidents rises so rapidly as to leave no room to doubt that the higher accident risk accompanies the decline in working capacity of the employee.

These conclusions are based on so careful a study by officers of the U. S. Public Health Service and on so large a number of employees that they may undoubtedly be applied by industrial engineers generally.

The full report is contained in Public Health Bulletin No. 106, which is the first of a series to be

published by the U. S. Public Health Service on the problems of industrial working capacity. In the two hundred pages making up the present report is presented a wealth of information which no industrial en-

gineer can afford to neglect. Certainly if American industry is to maintain its present leadership it will only be as the result of the application of sound physiological principles.

PATENT MEDICINES

"Hope springs eternal in the human breast," or words to that effect, runs a poetic effusion, which, done into more understandable, if less eloquent, prose by the late J. T. Barnum, means that there is a fool born every minute.

Profitable business can be done by trading on this peculiar tendency in human nature. More than eighty million dollars are spent annually by the credulous in the purchase of "sure-cure" patent medicines for real or fancied ills.

While we cannot be the guardian of people who wish to spend their money in the purchase of patent medicines, yet we are concerned in the preservation of the health of the people and, therefore, feel that we are rendering a useful service in reiterating the fundamental objections which stand against the patent medicine game and the correlated practice of selftreatment.

The great wrong of the patent medicine game is not so much in that the public is induced to spend good money for more or less worthless nostrums, but in that it is led into a loss of time for which there is no replacement.

There is many a dollar foolishly spent, and the spending of dollars for some quack medicine is in and of itself not much different from the

many games of buncombe that are worked upon a credulous public every day in the year.

There is, however a difference in the ordinary confidence game and the patent medicine fraud.

A man in good health with a few dollars to spare in his pocket can afford to get bumped—in fact, it may prove a very good, if expensive lesson.

However, where a person sick and with lessened earning capacity is concerned, the case lies different. Not only is such a person in a position where he can less well afford the loss in dollars and cents, but above all he cannot afford the loss in time into which the patent medicine vendor beguiles him.

A sick man is not in position to exercise his best judgment. Such a person is like a drowning man, ready to grasp at anything.

The cure of sickness is often a matter in which time is the determining factor. Today a cure may be possible; a month, a week from today—tomorrow in fact—may be too late.

To trick a sick man out of his chance of recovery by inducing him to waste his time with useless preparations, is a wrong for which no punishment can be too severe.

BANISH THE PARASITE.

The Cockroach.

Always keep food and food remnants inaccessible to the roach. All unnecessary corners, cracks, and imperfections in the structure of the building which favor breeding or furnish hiding places must be eliminated or treated with roach poison.

Sodium fluoride powder should be liberally sprinkled or blown with a powder blower into corners, drawers, closets, shelves, and other places of concealment, and distributed in such a way that it will not be swept up nor removed. It should be allowed to remain and act for weeks at a time. Sprinkle it along the back parts of shelves and out of the way places in recesses of drawers, cases, etc. It is not injurious to books or other materials.

Phosphorus in the form of a paste, is purchasable as a proprietary preparation. Pure borax is also used, either alone or in a mixture consisting of one part of powdered borax and three parts of finely pulverized chocolate or sugar, freely sprinkled around infested places. Fumigation by hydrocyanic acid gas or by sulphur dioxide will destroy roaches, but will not destroy the eggs, which subsequently hatch, making a second fumigation necessary.

Insect powder, 1 pound; powdered borax, 3 pounds; mix thoroughly and run through a No. 60 sieve two or three times. If used freely a few applications will do the work.

A trap for cockroaches is very simple and doesn't cost a cent. Take a pan or wide-necked glass jar and put some sugar or syrup in the bottom, then rub some grease up the sides so that the roaches cannot get out once they are in. Find where the roaches are entering the build-

ing, place the jar near there, and soon you will have them, all ages and sizes. Then they must be drowned in boiling water.

Ants.

Keep the kitchen free from food remnants and keep food supplies in ant-proof containers or ice boxes. Cake, bread, sugar, meat, and similar substances are especially attractive for ants.

Where it can safely be used, a syrup poisoned with arsenate of soda is effective. Dissolve one pound of sugar in a quart of water, and add 125 grains of arsenate of soda. This mixture should be boiled and strained and upon cooling may be used to moisten sponges which are to be placed where they can easily be reached by ants. Thus whole colonies may be poisoned. Remember the arsenate of soda is poisonous to human beings and animals, as well as to ants, and that its use must be safeguarded by the greatest precautions.

When the ants can be traced to their nests and these are in accessible places, they can be destroyed by injecting with an oil can or small syringe a little bisulphide of carbon, kerosene or gasoline into the nests. All these substances are inflammable, however, and precautions should be taken against the danger of fire.

Extreme caution should be observed in the use of poisons or poisonous compounds for these purposes. Packages containing poisons should always bear a warning label and should not be kept where children might reach them. The use of gasoline and other inflammable substances is likewise dangerous and the utmost care should be exercised.



FIRST AID TO THE INJURED



Poison Ivy.

Contact of the skin with poison ivy causes in many people a very annoying inflammation of the skin. The vine is of the climbing variety, with three pointed leaves on each stem. A few hours or about a day after the skin is exposed to the poison of this plant a red rash appears, with more or less swelling and itching; small blisters appear, filled with serum, even becoming quite large. When they burst there is considerable weeping from the surface. Later it may go on to a formation of pus. The hands and face, being the most exposed parts of the body, and the feet and ankles of those who go barefooted, are usually first affected. If the inflammation is very severe, there may be some incidental disturbance, such as fever, headache, and general feeling of malaise.

One of the best treatments for this disease is bathing with salt water, sea water being the best. Boric acid, 1 teaspoonful in a glass of hot water, is a good application. The large blisters should be punctured and the contents allowed to run out. Every one or two days, the affected parts should be bathed with warm water, carefully dried without rubbing, and the boric acid treatment resumed.

Articles Accidentally Swallowed.

Articles, such as buttons, coins, that have been swallowed, that is, that have passed into the stomach, will almost certainly cause no trouble since they are small enough to pass on and out with the food waste, through the bowels. In the

case of something, such as a pin, that has a sharp point, it is particularly important not to give purgatives since any violent contraction of the intestines, such as is caused by a purgative, is apt to drive the point into the wall of the intestine. To guard against such injury, it is wise to give dry food that leaves considerable waste, such as potatoes, corns, cereals, bread, etc.

In the case of a young child, particularly, one must always consider the possibility that the supposed swallowing has not taken place.

If, for any reason, it is desirable to determine whether the article swallowed is within the child, an X-ray photograph should be taken to include the entire alimentary canal, from the mouth to the anus.

Bodies Lodged in the Throat.

If a foreign body such as a pin, bone, or other article, has possibly lodged in the throat, one should carefully explore the latter with the forefinger, if necessary holding the mouth open with a finger of the other hand around which a towel or a handkerchief has been wound, or by pressing cheeks between the teeth.

If the article has passed into the wind-pipe, it will cause violent cough which may expel it, and this may be aided by holding the child upside down and slapping him between the shoulders. Unless the article is expelled at once, a physician must be immediately called, since a foreign body in the wind-pipe is often sucked down in the lungs and may cause abscess formation or fatal lung inflammation.—Exchange.

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.

Sixth floor City Hall:
 Executive or General Offices.
 Child Welfare Division.
 Vital Statistics Division.
 Sanitary Inspection Division.
 Food Inspection Division.
 Venereal Disease Bureau.

Communicable Disease Division.
 Medical School Inspection Division.
 Bacteriological Laboratory.
 Chemical Laboratory.
 Eighth Floor:
 Tuberculosis Division.
 Nursing Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
 Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

TUBERCULOSIS

EIGHTH FLOOR, CITY HALL:

Friday mornings, and every afternoon from 1:30 to 4:00 o'clock for adults with the exception of Saturday.

Saturday mornings, from 9:00 to 12:00 o'clock for children.

NORTH SIDE DISPENSARY, MARQUETTE MEDICAL SCHOOL, 4th St. and Reservoir Ave.

Wednesday mornings, from 10:00 to 12:00 o'clock.

NORTH SIDE STATION, 2920 North Avenue.

Thursday mornings, from 10:00 to 12:00 o'clock.

SOUTH SIDE STATION, 670—6th Ave.

Thursday evenings, from 7:00 to 9:00 o'clock for adults.

Saturday mornings, from 9:00 to 12:00 o'clock for children.

Services at these clinics are rendered without charge and any resident of Milwaukee may visit these clinics and consult with the physicians in charge.

CHILD WELFARE

Sixteenth Ave. School, cor. Mineral St.—Tuesday 9:30 to 10:30 A. M.

Walker St. School, cor. Greenbush St.—Monday, 3:00 to 4:00 P. M.

Hanover St. School, near Mitchell St.—Friday, 2:00 to 3:00 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 3:00 to 4:00 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2:00 to 3:00 P. M.

St. Casimirs School, Clarke & Weil Sts.—Thursday, 2:00 to 3:00 P. M.

St. Hedwigs School, Brady & Franklin—Friday, 3:00 to 4:00 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2:00 to 3:00 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and 9th—Wednesday, 2:00 to 3:00 P. M.

North Ave. Station, 2920 North Ave.—Wednesday, 2:00 to 3:00 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

HEALTH BRIEFS.

Dr. John P. Koehler, former deputy commissioner, has left the department to take the position of Chief of the new County Dispensary. Dr. E. V. Brumbaugh has been appointed in his place.

More than 1,200 children in the nutritional clinics were guests of the Health Department at a performance of Cho-Cho, the health clown, at the Alhambra Theatre, Saturday, June 5th.

Thirty-seven portable ice stations have been opened under the supervision of the Health Department in various parts of the city. Ice is sold from these stations on a "Cash and Carry" basis at reduced rates.

The Sanitary and Food Inspection Bureaus of the Health Department are engaged in an intensified campaign for "clean food in clean places." Seventeen warrants were sworn out by the Food Inspection Bureau and ten by the Bureau of Sanitary Inspection, against offending restaurant keepers.

Garbage collection is a service under the jurisdiction of the Department of Public Works. All complaints concerning failure to collect garbage should be made by calling up the Complaint Clerk of the Department of Public Works, Broadway 3715.

Ask Us About It

Child Welfare

Maternity Care

Tuberculosis

Sex and Contagious Diseases

Patent Medicines

Food Hygiene

Nuisances

Sanitation

Milwaukee Health Department

CITY HALL

Broadway 3715

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

SEPTEMBER 1920.

Vol. 10, No. 7.

“NOTHING is so valuable economically as the man. To injure or to kill him is to destroy the one essential element in the scheme of world-wide civilization and prosperity Injury and death are the fruits of ignorance, recklessness and greed. A death toll is no part of a properly managed industry. It is wasteful, wantonly wasteful. The saving of life thus becomes an industrial issue The new workshop is a safe shop.”

—IDA M. TARBELL.

THE MILWAUKEE HEALTH DEPARTMENT SCHOOL OF HEALTH AND SANITARY SCIENCE FACULTY

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

E. V. BRUMBAUGH, M. D., Deputy Commissioner.

GEORGE E. ADAMS..... Vital Statistics
GEO. P. BARTH, M. D..... School Hygiene
F. E. CHURCH..... Bacteriology
RUSSELL W. CUNLIFFE..... Chemistry
GEORGE R. ERNST, M. D..... Tuberculosis
C. J. KENNEY, M. D..... Contagious Diseases

E. T. LOBEDAN, M. D..... Child Welfare
AGNES J. MARTIN, R. N., Superv. of Nurses
WM. J. McKILLIP, M. D., Venereal Disease
STANLEY L. PILGRIM, M. D. C.,
..... Food Hygiene
T. F. THOMSON, M. D..... Sanitation

STATE LAWS YOU OUGHT TO KNOW.

Diphtheria or Membranous Croup.

The rule for the quarantine and control of diphtheria is amended to read as follows:

Patient. 1. Quarantine for patient until two negative cultures, taken not less than twenty-four hours apart, show the absence of diphtheria bacilli, and disinfection of person, clothing and premises.

Contacts. 2. Persons exposed to or in the family with the patient must be quarantined. All persons (children and adults) exposed to or in the family with the patient cannot be released from quarantine until a culture obtained from both the nose and throat shows the absence of diphtheria bacilli and after disinfection of person and clothing.

3. Children remaining in the home with a patient under quarantine cannot return to school until five days after one negative culture has been obtained from both the nose and throat and the quarantine removed from the home; such culture to be taken at the time the release cultures are taken from the patient.

4. Children exposed to or in the family with the patient may return to school providing one negative cul-

ture has been obtained from both the nose and throat and they have taken up their residence elsewhere for five days.

5. Contacts not in the family with the patient may return to school after one negative culture has been obtained from both the nose and throat.

Carriers. 6. By the term "carriers" is meant all individuals from whom a throat culture or a nose culture shows the presence of diphtheria bacilli when no clinical symptoms of the disease are present. All carriers must remain under quarantine until two successive cultures taken not less than twenty-four hours apart show the absence of diphtheria bacilli and after disinfection of person, clothing and premises.

For chronic carriers (persons who harbor diphtheria bacilli in the nose and throat for a period longer than six weeks) special arrangements for isolation may be made with the State Health Officer.

7. All cultures taken for the release of cases of diphtheria or diphtheria carriers shall be taken by a representative of the local board of health.

Bulletin of the Health Department

*Published for the Citizen of
Milwaukee, Wis.*

SEPTEMBER 1920

SAFETY FIRST.

BY GEO. C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

For some years now there has been a growing consciousness of the need for concentrated effort to reduce the number of accidents.

America is known as a country of extravagance. The tendency to be extravagant apparently extends to human life as well as to the expenditure of money. According to the reports of the Interstate Commerce Commission, it appears out of the 30 million workers in the United States over 500,000, yearly, are crippled or killed as the direct result of the occupations in which they are engaged—more than were killed throughout this country's participation in the World War. Nor do these statistics tell the full story. They do not take into account the vastly larger number of accidents occurring outside of industry. The increased use of motor vehicles is a large contributor to these accidents.

During the last year, the reports

of the Health Department show 235 deaths by accidents. The number of injured in whom the injury did not result in death can easily be placed at 10 to 20 times this figure.

It is safe to say that over half of this tremendous sacrifice in life and the misery and invalidism that result otherwise from such accidents could be avoided. The essential cause for these accidents can be found in carelessness. In a world that has become accustomed to move along at high pressure, less and less regard is being shown for one's fellowmen. Isn't it time that a halt be called in this mad rush? As a nation that prides itself on its intelligence, development, and ability to do everything as well or a little better than any other nation, should we not use every effort to eliminate this appalling loss of life? We can do it if we will make up our minds to do so.

is stated on good authority that during the two and one-half years the United States was engaged in the war about 80,000 soldiers were killed or died of disease. But during

the same period cancer killed 180,000 people in this country. Yet people do not get excited over cancer deaths as they do over those killed in battle or the hardships of war.

Open-Air Camp for Undernourished Children.

By E. V. BRUMBAUGH, M. D., Deputy Commissioner of Health.

During the past summer vacation the Health Department with the co-operation of the Marquette Women's League, Junior Red Cross and the School Board, has conducted an open-air camp for those children who had lost in weight during the nutrition clinic activities conducted while school was in session. These children were carefully selected from all parts of the city, and enrolled in the camp, where a special program was given for the purpose of stopping the losses of weight.

When the children arrived at the camp in the morning, they were given a lunch of bread and butter, fruit and milk. They were then dismissed to the play-ground for an hour of play. Following this hour, they were then given corrective gymnastic exercises for a short period (10 or 15 minutes). Twice weekly, following the play and exercise they were given shower baths, followed by a story hour. At 11:45 they began to make preparations for their noon-day dinner, which was prepared by the matron. A sample days' menu would be as follows:

Morning Lunch — Stewed prunes, crackers and milk.

Dinner — Lamb stew with vegetables, rice or lemon custard. Bread and butter.

Afternoon Lunch — Crackers and milk.

After dinner, a toothbrush drill was given. The children would then go to the pavilion where they would rest for an hour and a half. Most of the children learned to sleep through this period, and those children who

were able to sleep were the ones who made the best weight gains during the summer. After the rest period an hour of play and then the mid-afternoon lunch of milk and bread and butter. The rest of the afternoon was then given to instructive exercises—the girls being given sewing and Little Mothers' Classes on alternate days, while the boys did coping saw work or First Aid on alternate days.

At 5:00 o'clock the children were dismissed for their homes.

Sixty-nine children were enrolled during the entire progress of the summer. The average attendance was 39 children per day and of those children who attended regularly, only three continued to lose. The losses in weight of all the remaining children was stopped and 46 of the children not only made gains in weight, but made more than the normal weight gains for children of their age. The largest individual gain made by any child was by a girl who gained $7\frac{1}{2}$ pounds in six weeks. The largest gain made by a boy was $3\frac{1}{4}$ pounds in six weeks.

One of the lessons of this fresh-air camp that is most impressive is the importance of rest and sleep for undernourished children during the day time. This appeared over and over again as the nurses watched the progress of the children. Those who were able to sleep gained and continued to gain; those who were restless and wakeful failed to make the progress that was made by those who slept.

VOTES FOR WOMEN.

BY GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

We do not feel that the bulletin should devote its pages to discussion of political problems as these are ordinarily understood. Nevertheless, we feel that the granting of the vote to women is a question of such far reaching importance and of such immediate interest to health matters, that a few words devoted to this question are well justified.

Whatever else the effect of votes for women may be in the politics of this country, one thing is certain—that it is bound to have a beneficial effect upon the progress of health work.

The work of health departments is now understood as essentially preventive work. It is work that seeks correction of social difficulties and of

the attendant disease problems by curing them from within rather than by palliative measures applied from without.

For the advancement and betterment of public sanitation, the home is the unit. Home life is essentially within the sphere of women. It is therefore reasonable to expect that women will take a greater interest in matters that will mean the uplift and the improvement of the home and with the improvement of personal and public sanitation than will men. We therefore welcome Votes for Women because we feel confident that it will mean advancement and progress in public health and sanitation, such as we have not seen heretofore.

THE LOW COST OF HEALTH.

There appears in the "Toronto Health Bulletin" for June, 1920, a very interesting article on "The Low Cost of Health," which is copied below:

"It is gratifying to know when we have forced upon us at every turn the high cost of living, that it has not affected many of the necessities in connection with the cost of health. Many of the most important things in connection with maintaining health can be had for nothing.

It does not cost anything to secure an ample amount of fresh air in your home.

It does not cost anything to take a walk in the open air, breathing properly, keeping the body in an erect posture.

It does not cost anything to take

a few simple exercises every morning.

It does not cost anything to chew or masticate your food thoroughly.

It does not cost anything to select the food best suited to your body requirements.

It does not cost anything to clean the teeth twice a day.

It does not cost you anything to stop using patent medicines.

And lastly, it does not cost you anything to have a cheerful happy disposition, stop worrying and cut out your grouches.

The foregoing are the essentials for good health. It is not only a fact that they cost nothing, but they will aid in reducing the cost of living by reducing your doctor's bill and your medicine bill."

MILWAUKEE HEALTH DEPARTMENT

SERVICE DIRECTORY.

Sixth floor City Hall:	Communicable Disease Division.
Executive or General Offices.	Medical School Inspection Division.
Child Welfare Division.	Bacteriological Laboratory.
Vital Statistics Division.	Chemical Laboratory.
Sanitary Inspection Division.	Eighth Floor:
Food Inspection Division.	Tuberculosis Division.
Venereal Disease Bureau.	Nursing Division.

OFFICE HOURS.

8 A. M. to 12 M. 1:30 P. M. to 5 P. M.
Saturday afternoons and Sundays, Closed.

TELEPHONE CALLS.

The City Hall telephone number is Broadway 3715.

When you have the City Hall, do not ask, merely, for the "Health Department"—get the proper person or division. If uncertain with whom you want to talk, tell the operator, briefly, what it is about; she will direct your call.

CLINICS.

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HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

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Wright Drug Co., 328 Grove St.

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HEALTH BRIEFS.

The increasing cost of printing and an insufficient budget have been responsible for suspending the publication of the Bulletin during the months of July and August, and are now forcing us to cut down the bulletin to one-half its number of pages.

The second Baby Clinic conducted by the Health Department, in cooperation with the Red Cross, is to be opened at the Health Department Station, South Side, on Friday afternoon, September 17th, under general charge of Dr. J. Gurney Taylor, assisted by Dr. J. P. Zuercher.

The whooping cough and measles epidemics have about disappeared, the number of cases on hand now being less than at the same time last year. An unusual number of cases of diphtheria has been noted during the summer, but the number on hand at the present time is about normal. Small pox is above the normal number.

Essentials in School Hygiene

A free course of lectures for school teachers.

October 7th to December 16th, 1920.

Public Museum Lecture Hall, Eighth St. entrance.

Thursdays — 4:00 to 5:00 P. M.

Register now.

School Board or Health Department, City Hall.

FIRST AID AND HOME CARE of the SICK

A course for women only.

Ten demonstration lectures.

Once Weekly.

Registration Fee — \$1.00.

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NURSING DIVISION
Milwaukee Health Department
CITY HALL Broadway 3715

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

Vol. 10

OCTOBER 1920

No. 8

WORK FOR WOMEN.

By GEORGE C. RUHLAND, M. D., HEALTH COMMISSIONER.

The Health Department recently called a meeting in the interest of infant and maternity welfare, to which were invited representatives of the many public and private agencies of the city that are engaged in one phase or another of public health work.

It is not that the matter of infant and maternity welfare has been neglected here in Milwaukee. For many years the Health Department and others have been active in this field, and with very creditable results.

According to the latest figures available through the National Child Hygiene Bureau, Milwaukee's infant death rate stands at 89. per thousand living births. This, indeed, compares quite favorably with the infant mortality rates as quoted for other large cities in the country.

However, it is not a matter of immediate concern to us if other cities do up less favorably or not. What does matter is the question—Can we do better? How many of the more than a thousand babies that die before their first year of life here in

Milwaukee can be saved, should be the question.

Even more important, if not more pathetic, is the annual loss of life of mothers due to accidents or complications of child birth.

Home life is built essentially about the mother. The removal of the mother from a home seriously threatens the entire family. To preserve the life of a mother is, therefore, one of the most important considerations not only for family life, but for the entire social structure which is built upon this foundation.

It is not, let us repeat, that nothing has been or is being done in the interest of these problems; it is in the hope that better work may be done that the conference referred to was called.

It is hoped that the conference may lead to the adoption of a definite program, in which the efforts of all the various agencies now in the field may be co-ordinated, so as to best assist and supplement the work of the public health agencies.

If this were done, very definite im-

provement over what has been accomplished so far, may confidently be expected.

A special appeal finally is to be made to the women of Milwaukee, who, as represented in various organized clubs, are especially invited to help in the problem.

Among the many problems of pub-

lic health work, that of infant and maternity welfare is peculiarly a woman's problem.

Now that equal recognition before the Law has finally been granted woman, let her use her rights and privileges well in the interest of this as well as the many other health problems.

Preventing Decay in Children's Teeth.

By HENRY LARNED KEITH SHAW, M.D.

Children's teeth have received but scant attention until quite recently. Just because the first set of teeth is temporary they were neglected by the parents, ignored by the dentists, and overlooked by the doctor. It was commonly supposed that decayed teeth were hereditary, and that the children of parents who had bad teeth were destined to the same affliction. Another common error was that a decayed tooth is the result of uncleanness and that the chief factor in its prevention is the toothbrush. This has led to the popularization of oral hygiene, toothbrush drills, etc., which undoubtedly was a step in advance, but did not reach the source of the trouble.

A decayed tooth is a diseased tooth and is very largely caused by improper and deficient diet. By deficient diet is meant foods which do not contain enough lime or require enough mastication. Lime is an essential ingredient in the production of bone and teeth, and a tooth with insufficient lime is very apt to fall a victim of dental decay.

Mastication stimulates the flow of saliva which cleanses the teeth, and the friction of the food scours and

polishes them, while the action of the jaw muscles brings a larger supply of blood to the teeth.

The temporary teeth commence to form in the fifteenth week of foetal life so that the diet of the pregnant mother assumes special importance in this connection. Some dental authorities contend that the condition and structure of the first set of teeth depend entirely on the diet of the mother before the baby is born and during the lactation period. Therefore the mother should give thoughtful attention to her diet during pregnancy and lactation and see that it contains natural foods such as milk, meat, vegetables, fruit, and cereals, which contain sufficient lime and phosphate for bone and tooth formation.

Many mothers do not realize that breast feeding is an important factor in producing strong, healthy teeth. The testimony of dentists will show that it is very unusual to find healthy teeth in children who have been artificially fed, especially prepared infant foods.

Another very important factor in preventing decay in children's teeth is the matter of diet of the child.

It is now recognized that children with good teeth have good teeth because of good dietetic habits, and children with bad teeth have bad teeth because of bad dietetic habits. This applies both to the type of food taken as well as the manner in which it is masticated. The diet during early childhood therefore assumes an important part in the formation and protection of the teeth. There are certain types of food that will keep the teeth and mouth physiologically clean and prevent decay while others will tend to lodge in the crevices and undergo acid fermentation and produce decay. The foods which should be avoided are principally farinaceous and sugary foods without fibrous element, sweet biscuits and cake, bread and jam, fresh white bread and soft crackers, bread soaked in milk, preserved fruits, candies and chocolate.

Among the cleansing foods which are antagonistic to the formation of decay on account of their fibrous character and high lime content may be mentioned fish, meat, bacon, poultry, vegetables rich both in fiber and lime, such as celery, radishes, tur-

nips, beans, cabbage, carrots, cauliflower, etc.; fresh fruits, especially those requiring mastication such as apples; cooked cereals, whole wheat or bran bread, stale bread with crust, zwieback and toasted bread of all kinds.

The following sample menu will serve to illustrate the type of meals which would prevent dental caries in a child over two years of age:

Breakfast. Cooked cereal. Crisp toast or stale bread and butter. Milk to drink. Raw apple.

Dinner. Split pea soup with croutons. Rare roast beef. Baked potato. Spinach. Stale whole wheat bread and butter. Rice pudding.

Supper. Cooked cereal. Apple sauce. Stale whole wheat bread and butter. Milk to drink.

If in connection with a suitable diet careful cleansing of the teeth night and morning is employed, there will be no unsightly and malodorous teeth, no disturbed digestion from insufficiently masticated food, no deformed jaws from maloccluded teeth, and our children's children will grow up in better physical condition—stronger men and women.

VALUE OF EXERCISE.

According to the U. S. Public Health authorities the increasing mortality in this country due to the degenerative diseases, such as those involving the kidneys, heart and blood vessels, is due to the increase in the sedentary occupations. Mental work calls for and uses more nervous energy and also deprives the system of that natural assistance which physical exercise affords to

the various and necessary eliminative processes.

This is why the kidneys become overloaded and fail to function. And also lacking the normal aid which working muscles give to circulation, the arteries become brittle and weak; and the heart itself as flabby in muscular strength and development as are the biceps of the average man of sedentary habits and occupations.

BLUE MOUND SANATORIUM.

By GEO. C. RUHLAND, M. D., COMMISSIONER OF HEALTH.

In a communication directed to the Common Council, the Commissioner of Health recommends that Blue Mound, the City's sanatorium for the care of the tubercular, be transferred to the County, and be operated in coinjunction with Muirdale, the County's tuberculosis sanatorium.

The recommendation is based on two main reasons—first, because of the economies that could be effected thereby and, secondly, because institutional care of the tubercular is not a proper function of the Health Department.

Inasmuch as the City contributes 86% of the County's money, it is obviously an expensive duplication of effort to operate institutions separately which are devoted to the same purpose.

The City's and the County's sanatorium are fortunately lying in fairly close proximity. A single supervision of both institutions could, therefore, easily be carried out. This would mean a material reduction and saving in the overhead expense, to which collective purchasing of supplies and equipment would add a further saving.

In addition thereto, the County is able to secure financial support in the form of a state subvention, amounting to \$7.00 per patient per week. On this basis Blue Mound, under the County, could practically be made selfsupporting. On the other hand, Blue Mound, as a city institu-

tion, does not enjoy this advantage.

Aside from these obvious financial advantages, it seems proper also to transfer the institutional care of the tubercular, on the grounds that it is not a proper Health Department function. The activities of the Health Department should be directed towards preventive work.

Here there is still very much work to be done. It obviously is an extravagant and misdirected effort if we try to handle the problem of tuberculosis merely by institutions. We will never succeed in lessening tuberculosis if we let our efforts stop with institutional care.

It must be the Health Department's efforts to *prevent* tuberculosis. This can only be done by correcting the home, social and economic conditions under which the disease primarily develops. Unless this is done, patients whose tubercular infection may have become arrested and cured at a sanatorium, will likely be returned to the sanatorium within the course of time, and all expenditures in time, effort and money will practically have been wasted.

The Health Department's program for tuberculosis calls, therefore, for a much enlarged and much strengthened home prevention service, this means a much larger number of nurses and home workers, as well as physicians. If the public believes in such a program for prevention, let it provide the needed service.

The School Teacher as Health Guardian.

Seldom is a system of medical school inspection so elaborate that the services of the teacher are not essential to efficiency. Many teachers are overwhelmed by the idea of passing judgment as to whether a child should be sent home or not. A knowledge of medicine is not necessary. In fact, "a little knowledge is a dangerous thing," and the teacher should act on one plan only. She should aim to send home every child which shows any symptom of beginning infectious disease without attempting to make a diagnosis. Above all, the child with a running nose or fever should be excluded. A clinical thermometer and solutions for disin-

fecting it should be in every teacher's equipment. Sudden vomiting, headache or sore throat are reason enough for sending a child home and asking that the health officer or school physician investigate, or that the family physician be called. The school physician and the public health nurse, with their medical knowledge and training, are necessary for advising and backing up the teacher, but on the firing-line must be always the alert school teacher. On her we depend for the protection of our children. She can make the school safe.

—California State Board of Health.

TO PREVENT COLDS.

By GEO. C. RUHLAND, M. D., Commissioner of Health.

Before very long the acute infection, commonly called a "cold", will be with us again. It is most unfortunate that "colds" should be considered as the inevitable concomitant of cold weather.

That low temperature, as such, is not the cause for "colds" is amply proved by the practically uniform experience of explorers of the Polar regions, who report exceptional freedom from so-called "cold" while living in a temperature many degrees below the freezing point.

It is significant that "colds" develop among them again only as they turn to the more intimate contact of their fellow-beings under the crowded conditions of modern city life.

From this it is evident that it is rather the result of contact with our fellow-beings that produces "colds" than the matter of low temperature.

Nevertheless, it cannot be denied that exposure to low temperature, especially of those not in vigorous health, is decidedly depressing, harmful, and predisposing to infections, such as colds and pneumonia.

Indeed, the sudden change from the dry, superheated atmosphere of the average office building or home, to the cold out-of-doors of winter, is a severe tax on the health of even the physically strong, and may so depress vitality and resistance as to permit the development of a "cold" or "pneumonia".

In the final instance, however, all

colds and pneumonias are developed from contact with some one who has, or has recently had a cold. Colds are contact infections.

To avoid "colds" means, therefore, first of all, the avoidance of contact with those who have colds.

There are, however, many other factors that may render us more susceptible to "colds", such as the exposure to extreme temperature; the superheated, unventilated room is more at fault in this connection than is the cold out-doors.

Needless to say, the body, and particularly the feet, should be adequately protected and kept warm

and dry. A plain and nourishing diet is best. Avoid overeating. Elimination must be regular and complete.

The practice of a cold douche each morning to neck, chest and feet, is also excellent as a tonic and preventive to colds. The douche, however, should be not more than of a minutes' duration, and must be followed by vigorous rubbing with a coarse towel.

Those of feeble health, or those who fail to secure the prompt reaction of a warm glow of the skin, should not continue the practice without the advice of a physician.

OUTDOOR SLEEPING.

Unfortunately most people can not live out of doors all of the time, and many are so situated that they can not even secure ventilation, granted that they want it. But there is one important part of the twenty-four hours when most people can completely control their own air supply. This is at night. We spend a third of our time in bed. Most of us live such confined lives during the day that we should all the more avail ourselves of our opportunities to practice air hygiene at night.

It is the universal testimony of those who have slept out-of-doors that the best ventilated sleeping room is far inferior in healthfulness to an outdoor sleeping porch, open tent, or window tent (large enough to include the whole bed). For generations, outdoor sleeping has occasionally been used as a health measure in certain favorable climates and seasons. But only in the last two decades has it been used in ordinary

climates and all the year round. Dr. Millet, a Brockton physician, began some years ago to prescribe outdoor sleeping for some shoe factory workmen who were suffering from tuberculosis. As a consequence, in spite of their insanitary working places (where they still continued to work while being treated for tuberculosis), they often conquered the disease in a few months. It was largely this experience which led to the general adoption, irrespective of climate, of outdoor sleeping for the treatment of tuberculosis. The practice has since been introduced for nervous troubles and for other diseases, including pneumonia. Latterly the value of outdoor sleeping for well persons of all classes, infants and children as well as adults, has come to be widely recognized.

Outdoor sleeping increases power to resist disease, and greatly promotes physical vigor, endurance, and working power.

Many people are still deterred from sleeping out by a mistaken fear of night air. The truth is that night especially in cities, is distinctly

purer than day air, on account of the fact that there is much less traffic at night to stir up dust.

From "How to Live."



FIRST AID TO THE INJURED



Stomach-Ache.

Emergency aid for stomach-ache is best given in the form of copious draughts of warm water which serve to dilute any irritant such as soured food, and which will often serve to promote vomiting, thus getting rid of the disturbing element altogether. A teaspoonful (level) of baking soda in hot water is always helpful, as it neutralizes sour substances in the stomach. Pain low down in the abdomen is not from the stomach, and if from intestinal disturbance, will not cease until the bowels have moved freely.

Of course, a child, like an adult, may be suddenly seized with abdominal pain due to a serious inflammation, and one must always be suspicious of all severe pains and see that a physician examines the case at the earliest possible moment.

—Exchange.

Foreign Bodies in the Eye.

Particles of dust frequently lodge in the eye and sticking in the conjunctiva (the membrane lining the eyelids and covering the eye-balls), scrape against the opposite surface whenever either the lid or the eye-ball is moved, causing pain and inflammation.

Sometimes the movements of the lid and eye-ball are sufficient to dislodge the particle; at other times it is so

firmly lodged that it has to be picked out. For this latter, a good light is always necessary, and, since a particle most frequently sticks in the under surface of the upper eyelid, it is best to examine this first.

The child should be seated facing the light, and the examiner should stand behind. Gently lifting the upper lid by means of the eye-lashes held between the fingers of the left hand, the lid may be easily turned over the bend of a hairpin held against the skin surface of the lid, by the right hand of the examiner. When this has been done, the hairpin should be removed, the lid being held everted by the left hand, and, by means of the point of a fold in a clean handkerchief, any particle seen should be removed by gently wiping it off. One should always carefully look over the surface of the eye-ball, and the lining of the lower lid since the particle, or additional ones, may be lodged there.

Sometimes considerable irritation may remain after the particle has been dislodged, and for this the application of a cold wet cloth, or even a dry bandage to keep the eye at rest, is useful.

In any case whenever the particle is not removed, or where perceptible injury has been done to the eye, the child must be sent at once.

—Exchange.

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Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

GEORGE C. RUHLAND, M. D., Commissioner of Health, Director.

Vol. 10

NOVEMBER 1920

No. 9

MORE HEALTH WORKERS.

Foremost among the requests of the Health Department for the coming year stands the item of fifteen field nurses to be added to the department force.

The addition of this number of nurses is absolutely essential to carry forward the department's work of disease prevention. The nurses in the Health Department are engaged in what is known as district nursing, which means that all the various activities of the Health Department, for which nurses are employed, are carried on by the nurse in a given district. This work includes infant welfare, school hygiene, contagious disease work, and tuberculosis.

At the present time the Health Department operates with fifty field nurses. On this basis, the number of nurses available for the city's child population is approximately one nurse per three thousand children. The standard as recommended by the National Bureau of Child Hygiene is one nurse per thousand of child population. If the additional number of nurses asked for will be granted,

this relation will be improved to one nurse per two thousand of child population. It is, therefore, a conservative request, and one which was approved of and urged by a special committee of the City Club in a report submitted to and adopted by the Common Council in 1919.

Figuring the number of nurses now employed by the Health Department on the standard for public health nursing, we find that the city now employs approximately one nurse to each 8,000 of population. This is more than four times lower than the standard recommended by the National Association for Public Health Nursing.

Regardless, however, of what the recommendation of national bodies may be, this fact should be clearly understood by the public who must ultimately pay for the service. In order that we save child life and protect the public against contagious disease, it is necessary that we increase within reason the number of the agents who can do such preventive work. Among those agents, the

public health nurse is easily the most valuable. It is she who comes in immediate contact with the public that needs this service.

The work of preventing tuberculosis, for instance, will never be solved by merely finding the tubercular case, examining it in a clinic, and then transferring it to a sanatorium. The case may be cured while at the sanatorium, but so long as the conditions in home, shop, or factory, under which the disease primarily developed, remain unchanged, just so long will the cases of tuberculosis continue to develop. It is, therefore, very important that the home service be strengthened so that we will improve and correct those conditions under which diseases primarily de-

velop. This calls for an enlarged force of field nurses.

Coupled with this request for more nurses is the request for a dietitian. The need for a dietitian is closely related to the problems in child welfare, school hygiene and tuberculosis. It is in many instances not merely a question of food, but a question of how to prepare such food. This touches vitally the more than 5,000 children now in the Health Department's nutritional classes in the schools, and equally vitally the problem of dealing with the more than 4,000 cases of tuberculosis under the department's supervision.

For better advancement, therefore, in the problems of child hygiene and tuberculosis prevention, both these requests should be granted.

SLEEP REQUIREMENTS OF CHILDREN.

UNITED STATES PUBLIC HEALTH SERVICE.

It has been a matter of common observation that the average mother is quite ignorant of the importance of sleep from the standpoint of growth and development of young children. In fact, no nutrition worker can hope to secure successful results in the conduct of nutrition classes without due insistence that the child should obtain the required amount of sleep. In addition to the damage to the nervous system occasioned by stress and excitement usually associated with late hours, it will be found on inquiry that fidgety and nervous children are also suffering from "sleep hunger".

1. Medical authorities and others agree that school children need the following amount of sleep:

Age in years.	Hours of sleep required.
4	12
5 to 7	11—12
8 to 11	10—11
12 to 14	9—10

2. Children grow mainly while sleeping or resting. Do you want your children to grow up stunted?

3. Tired children learn badly, make little progress at school, and often drift to the bottom of the class. Do you want your children to grow up stupid?

4. When children go to bed their sleep is often disturbed by dreams and they do not get complete rest. Do you want your children to sleep badly and become nervous?

5. Sufficient sleep draws a child onward and upward in school and in home life. Insufficient sleep drags it backward and downward. Which way to you want your child to go?

6. Tiresome children are often only tired children. Will you put the truth of this to the test?

7. Time spent out of bed means more wear and tear to children's clothes and boots. Why not save such wear and tear?

8. A tired mother might get a quiet hour or two if the children were in bed by 6:30 p. m. Why not take advantage of this?

9. The fact that a neighbor's child is sent to bed too late is not a good reason for sending your child to bed too late. Two wrongs don't make a right, do they?

10. Going to bed late has by now become a bad habit, which may be difficult to cure. Will you persevere till you succeed in curing it?

The Problem of the Mentally Subnormal.

The proposition that a sick man cannot work as well as one who is physically sound, does not seem to offer much difficulty in understanding. The experience of the draft during the late war has done much to enlighten public opinion with regard to the need of physical soundness.

There seems to be, however, less understanding and appreciation of the need for mental soundness. Yet here, too, the lessons of the Draft Board should be a convincing argument. Out of the more than 33% of the young men who were rejected as unfit for military service, fully 13% were rejected because of mental unfitness. It should be realized that the young men who were rejected by the Draft Board, had generally passed the muster of popular opinion as to their physical and mental soundness. It is obvious, therefore, that more enlightenment is necessary. It must be understood that the development of the brain and mental capacity by no manner of means proceeds equally and normally in all in-

dividuals, nor that physical stature is a sufficient index to normal development of the mind. An individual who has grown to full physical stature, may have the mentality of a child of only seven or eight years. This means that he will not have the ability to judge and reason for himself in a manner that will best enable him to compete in later life. It means that he may commit acts which, excusable in the child, become offensive and objectionable in the grown-up.

It is fortunate that we are able to recognize these cases of arrested mental development at a comparatively early age. It is possible also by placing under proper conditions of environment, and training them within the degree of their intelligence, to enter many of them safely into industry where they become selfsupporting.

The best time for the studying of the mental status, obviously is childhood. There are in our schools at the present time approximately 3,000 children whose mental capacity will

never enable them to pass through all of the primary grades. To force these children to continue in the routine of the prescribed school work is, therefore, not only a waste of effort, time, and money, but it is cruel as well. Some of these children become truants and are launched upon a career of crime that will ultimately lead them into courts and penal institutions.

For the protection of the child's interest, as well as in the interest of the general public welfare, there should be provided in our health departments, specialists who are competent and able to make a proper study and analysis of the child's mind, so that those who fall below the normal standard can be properly graded and placed into training, and be made into useful and safe members of society.

WINTER CLOTHING.

The selection of proper clothing naturally is an important factor in protecting oneself against the cold of winter. It should be understood from the first that clothing, as such, do not product warmth.

The selection of clothing to be worn in winter must be based on the heat conserving property of such clothing. In proportion as the fabric is able to retain within its meshes the heat produced by the body, in that proportion will clothing be warm or cold. Woolens are the ideal fabric from this standpoint.

Only the minimum amount of clothing that will secure warmth should be worn. Woolens protect most, but they require the least exercise of the temperature regulating apparatus of the body. While wool is also highly absorbent of moisture, it does not give off that moisture quickly enough, hence, if worn next

to the skin, it becomes saturated with perspiration, which it long retains to the disadvantage of the skin. Consequently, woolen clothing is best confined to overcoats and outer garments designed especially for cold weather.

Underclothes should be made of some better conducting and more quickly drying material, such as cotton or linen. In winter, light linen mesh, and medium wool over that, can be worn by those who object to either linens or wool alone. It is a mistake ordinarily to wear heavy woolen undergarments.

The clothing worn as a protection against the cold of winter should be added only as we go out into the cold, but should not be worn in the warm indoor temperature. Garments that are loose and comfortable, and this applies especially also to shoes, will be warmer than tight fitting garments.

Moisture evaporated in heated rooms will add greatly to the comfort and healthfulness of the room atmosphere, and will save fuel as

well. Moist air feels warmer at a lower temperature than does dry air at a higher temperature. Try it by keeping dishes with water on stove, register, or radiator.

FATIGUE AND EFFICIENCY.

Under the title of Industrial Physiology, Frederic S. Lee, Ph. D., Professor of Physiology in Columbia University, and Chairman of the Committee on Fatigue in Industrial Pursuits of the National Research Council, presents a most interesting study of the influences of fatigue on efficiency. Carefully measuring the output of successive hours of the working day in different types of operations and plotting the daily curves of the output, his studies show a reduced efficiency as the day proceeds in the various kinds of pursuits studied, due to the fatigue influence. His conclusions must be of greatest interest to the employer of labor as to later itself. The report continues:

Reduction in the length of the working day is characterized by an increase in the output of the successive hours and usually by a total increase in that of the day. The optimum duration of work probably varies with the character of the work itself.

The introduction of resting periods in the working spell is accompanied, especially where the working day is long, by a total increase in the day's production. A five-hour working spell, unbroken by resting periods, is probably always too long.

Overtime following a day of labor is inadvisable, as is also Sunday work following a week's labor. These tend to impair the working power of the worker.

A hot day tends to impair strength and reduce output. Every effort

should be made to keep the body of the worker cool.

Night work is, in general, less efficient than day work. Its total output is less, and this, with a long working night, falls off enormously in the early morning hours. Alternation of periods of night work with periods of day work is more profitable than continuous night work.

Women are capable of performing a much greater variety of industrial operations than has heretofore been recognized. They should not be employed for night work. Statistics show that they are absent from their work more frequently than men. The problem of women as compared with men in industry is not that of their greater or less general efficiency, but rather a problem of what types of work each sex is best fitted for.

Accidents to workers are a grave source of inefficiency. They are caused by fatigue, inexperience, speed for working, insufficient lighting, high temperature, and other factors. Many industrial accidents are preventable, and adequate provisions for first aid measures tend to diminish the seriousness of accidents.

Food and efficiency are directly connected with one another, and suitable and adequate food can probably be best provided through the establishment of industrial canteens.

A high labor turnover is incompatible with the highest degree of efficiency. It is expensive, in that it imposes upon the employer the necessity of training new workers,

and it is a serious factor in the causation of accidents.

Physiological analyses of certain operations have been made by means of the cinematograph and other methods, and it has been found possible to eliminate unnecessary motions and to train workers so as to secure a more regular rhythm, such measures increasing efficiency.

The self-limitation of work on the part of workers has been studied and found to be very common. Every legitimate effort should be employed by foremen and managers to eliminate this and to induce workers to work up to their physiological capacity. Driving workers beyond their physiological capacity defeats its own ends.

TROUBLED FEET.

Aside from paralysis, clubfoot, or deformities resulting from injuries, etc., most foot troubles are due to improperly fitting shoes, improper position in walking or standing, lack of exercise, and weakness of the muscles in the forepart of the leg that support the arch of the foot. Properly fitting shoes of correct shape with a straight inner edge will help to correct weakfoot, bunions, corns, callouses, and painful joints.

Exercise the toe muscles by working the toes up and down over the edge of a thick board 30 times daily. Stand with feet parallel and somewhat apart with great toes firmly gripping the ground. Without bending the knees or moving the feet ro-

tate the thighs outward repeatedly. This is chiefly done by strong contraction of the great muscles of the back of the thigh and seat. Improve your general health; take general exercise to strengthen your body. Bathe the feet daily. See a surgeon if these simple measures are not sufficient. The arches found in the shops will not correct flatfoot. They merely act as crutches. Hammertoe, bunion, and many other defects can be corrected by a surgeon. Painful feet may be due to infection in tooth sockets or tonsils; search for such conditions should be made. Mere flatness of the foot without pain or other deformity may be of no importance.

U. S. P. H. S.

UNDERWEIGHT.

Underweight is often due to irregular habits of eating and sleeping and lack of regular exercise. Have a thorough examination at intervals

by a competent physician, or in a dispensary or clinic, to determine whether or not any serious disease exists. Eat freely of fat-forming foods.

OVERWEIGHT.

Secure as much regular exercise as possible. Be thoroughly examined for evidence of disease. Extreme overweight, especially at middle life,

produces as high a death rate as heart disease. Cut down the fat-forming foods, such as bread, butter, cereals, sugars, fats, and substitute more green vegetables and fruits.

It cost the city forty-five cents per case to protect the community against smallpox by vaccination. It cost twenty-eight dollars for each case of smallpox that must be taken care of at the Isolation Hospital!

Smallpox has been on the increase here as well as throughout the country. Protect yourself as well as your family by vaccination; it is a great deal cheaper for everyone concerned.



FIRST AID TO THE INJURED



POISONING.

Always send immediately for a doctor if poisoning is suspected, but pending his arrival the following is recommended:

First. Give the white of eggs, milk, or strong tea, as they will do no harm and are somewhat antagonistic to a number of common poisons.

Second. Get the poison out of the stomach as promptly as possible.

After administering the antidote the stomach should be emptied as quickly as possible. To cause vomiting, tickle the back of the throat with the forefinger or give an emetic such as luke-warm water mixed with mustard or common salt. A heaping teaspoonful of mustard or salt to a cupful of luke-warm water—stir it and have the patient drink the mixture. Repeat the dose every 10 minutes until 3 or 4 tumblerfuls have been swallowed if vomiting does not occur sooner. It is well to cause the patient to vomit several times and to have him drink freely of luke-warm water in the intervals. This process is in washing out the stomach. One or two teaspoonfuls of sirup of ipecac or wine of ipecac are good emetics. Such preparations of ipecac are often kept in the home to administer to children with croup.

There are a few poisons in which it is not wise to give an emetic, but in an emergency, in the absence of a doctor and specific knowledge to the contrary, the general rule for giving an emetic holds.

Third. After giving the emetic and producing vomiting, the various symptoms which arise should be treated according to the nature of the case.

If the pulse becomes rapid and weak, hot coffee, one-half teaspoonful of aromatic spirits of ammonia, or small doses of whisky or brandy should be given. If the patient is greatly weakened and prostrated, as he generally will be, hot-water bottles should be applied around the feet and extremities and measures taken to sustain the general strength.

Warning.—Poisons, such as carbolic acid or antiseptic tablets, should not be kept on the same shelf with harmless remedies. Such drugs should be kept in a separate place or in a special box and well out of the reach of children. Poisonous solutions should never be left in drinking glasses, as children or even adults may drink them without the knowledge of their dangerous character.

U. S. P. H. S.

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Vital Statistics Division.

Sanitary Inspection Division. Eighth Floor:

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Walker St. School, cor. Greenbush St.—Monday, 3:00 to 4:00 P. M.

Hanover St. School, near Mitchell St.—Friday, 2:00 to 3:00 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 3:00 to 4:00 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2:00 to 3:00 P. M.

St. Casimirs School, Clarke & Weil Sts.—Thursday, 2:00 to 3:00 P. M.

St. Hedwigs School, Brady & Franklin—Friday, 3:00 to 4:00 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2:00 to 3:00 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and 9th—Wednesday, 2:00 to 3:00 P. M.

North Ave. Station, 2920 North Ave.—Wednesday, 2:00 to 3:00 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.

Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.

Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

Bulletin

of the Milwaukee

Health Department

Publication of the MILWAUKEE HEALTH DEPARTMENT
SCHOOL OF HEALTH AND SANITARY SCIENCE.

GEORGE C. RÜHLAND, M. D., Commissioner of Health, Director.

Vol. 10

DECEMBER 1920

No. 10

Will It Pay to Continue the Fight on Venereal Diseases?

Leaving morals, health and decency out of the question, will it pay, financially, to continue the fight on venereal disease? Purely from a dollar and cents point of view, is a state or municipality justified in setting aside money to be used in a campaign to free its citizens from these infections?

Business executives may usually be counted upon as safe guides when it comes to getting big returns. They take few chances. They must be convinced that a thing is good before they will invest.

The draft found 5.6 per cent of the men between the ages of 20 and 30 years infected with venereal disease. This means that 56,800 between the ages of 20 and 30 are infected. An analysis of the venereal disease cases reported in one state during 1919 shows that only one half of those diseased were within this age group. On this basis we have not less than 1,136,000 diseased men in the United States. It was found that in the same state 75 per cent of the

cases reported were men and 27 per cent were women. Applying this ratio, there would be 420,000 infected women in the United States making a total of 1,556,000 venereal diseased persons.

The average loss of time, according to the Surgeon General's report of 1919, was twelve days for each man infected. If we estimate the average wage of \$4.00 per day for men between 20 and 50 and \$3.00 a day for men between 15 and 20 and over 50, the bill of costs for men infected with venereal diseases means a loss of \$150,000 a day, or a total of \$54,000,000.

By a similar calculation, and estimating that women earn \$1.00 less a day than men, the total loss of earnings of women who are infected amounts to \$15,000,000.

The Venereal Disease Cost to this Country in Wages Alone is More than \$69,000,000 a Year.

This does not include the loss through inefficiency and decreased production. One large industrial

plant made a study of the output of its workers and found that 33% were below normal and that 68% of its workers on the non-effective list each day were there because of venereal disease. The company established a clinic for treatment at its plant at a cost of \$5,000, and have estimated that it saved the plant \$150,000 a year in increased production, or 3,000% on its investment.

Five thousand plants have found that money spent in eradicating these diseases is good business, among them the Westinghouse Electric & Mfg. Co., The General Electric Co., Atlas Portland Cement Co., Solvay Process Co., Kelly Springfield Tire Co., The United Fruit Co., The DuPont de Nemours Co.

The heavy loss due to venereal diseases is borne not only by industry, but by the public, in the shape of accidents caused by venereal diseases. One railroad attributes four wrecks on its lines directly to syphilis. A large lumber company reports that two-thirds of the accidents at its various camps are traceable to venereal diseases.

In 1918 there were 2,000,000 industrial accidents in the United States. When one considers that as many or more will occur this year, and that many of them will be caused by syphilis, it does not take long to see that money spent in putting a stop to such disasters would not be wasted.

Another heavy expense is the extra compensation paid to employes

by insurance carriers on account of delayed recoveries from accidents where syphilis and gonorrhea prolong the convalescence.

The industrial companies, however, do not pay all venereal disease costs. The economic loss caused by these diseases in the general population is estimated at \$300,000,000 while the yearly cost of prostitution in this country is estimated at \$628,750,000. This includes the care of the insane due to venereal diseases and their economic loss, the cost of blindness due to these infections, the treatment of new cases among men, the sum that is paid direct to prostitutes, not to mention the amount they cost through the courts, police, hospitals and jails.

It is obvious who pays the bills. Whether the tax-payer believes that prostitution, the great source of venereal disease, is a necessary evil or not, part of his money goes to pay the cost that it inflicts on his state, county, or town each year. One city recently found that the annual cost of caring for its syphilitic insane was greater than the amount it spent to prevent tuberculosis, cancer, typhoid fever and all preventable diseases including venereal diseases.

In the light of what venereal diseases cost in money alone, not taking into consideration the deaths or lifelong injuries they do to the innocent as well as the guilty, can we afford not to carry on the campaign?

U. S. H. A.

Public health is a question in which every citizen should be vitally interested at all times. The more that is known about the matter the better, as thorough information means that people will be on the alert to protect their own health and thereby that of the community.

NEW MORAL STANDARDS.

Now that we women have a direct influence I believe it is our first duty to use it persistently to straighten the eyes of men legislators and men programme makers who traditionally look two ways at once on social ethics. For, when we get to the root of this problem we reach the fundamentals of half the social problems on which we are spending millions of dollars and much time and thought. The American public learned almost over night, early in the war, that to tolerate prostitution meant to toler-

ate venereal disease. Then they began to realize that continence for men is at least thinkable. Our effort should not be to make man's word safe for vice. Let us begin here to use our new power constructively, directly, and seriously. Let us vote for the men who are seeing straight and for the measures that will make a cleaner America—cleaner morally, mentally, and physically.

—Mrs. Ida Clyde Clarke in "Pictorial Review".

HOW TO PREVENT SICKNESS.

UNITED STATES PUBLIC HEALTH SERVICE.

There is nothing mysterious about the prevention of sickness. Clean homes, clean food, clean hands, clean teeth, clean milk, pure water, fresh air, sanitary privies, war on flies and mosquitoes—their cost is trifling, yet they work wonders and will prevent much sickness.

Are you sure you are doing your part?

Do you keep your home clean and well aired?

Is your drinking water safe? (If it comes from a spring or well, are you sure that no drainage from a privy, cesspool, or stable can pollute the water?)

Is the milk which your children drink either pasteurized or scalded? Do they each receive three glasses of milk daily?

Is the baby nursed at the breast

as he should be? Is he kept clean? Does he get plenty of fresh air and is he kept out of the hot, stuffy kitchen? Do you know that bottle babies should have orange juice each day after the first month?

Do you know that flies and mosquitoes carry disease, and do you keep them out of your house by proper screening?

Do you know that all colds are "catching" and may lead to dangerous disease in others, especially children?

Do you know that sickness is often spread by dirty hands? Do you always wash your hands before eating or handling food?

When any of your family is ill with scarlet fever, measles, diphtheria, whooping cough, typhoid fever, tuberculosis, or other prevent-

able diseases, is your health officer always notified so that he can help to keep the disease from spreading to others?

Is your home connected with a sewer? If not, have you a sanitary fly-proof privy?

Finally, are you and your family physically fit? How do you know? Have they been physically examined as the soldiers were?

Do you know that yearly medical examinations are useful to detect early signs of illness and so prolong life? If you can answer "yes" to all these questions, are you certain that your neighbor can, too? Don't let his carelessness endanger your health. In this great emergency the Government looks to all of its people to give it their whole-hearted support.

The medical examinations for military service showed that about one-third of the men suffered from physical defects which made them

unfit for active military duty. A large proportion of the defects discovered could have been prevented if attended to in early life; others could still be cured or relieved by proper medical attention.

You will do well to read over the following advice carefully; it may help you to improve your own condition or that of your children.

The time for patriotic service has not passed. The health of the youth of the Nation, indeed, of all citizens, is the greatest asset of the Nation.

We must not lose the lessons of the war; we have paid too high a price for them.

It is your duty to your family, to yourself, and to your country to keep well, to improve your health to the highest degree, to assist in making the Nation strong and fit for the great tasks ahead, and for the happier and larger life that awaits the people of this war-torn world.

WHY SICK PERSONS SHOULD REST.

Sick persons often rebel when the doctor orders them to "stay in bed" or keep quiet and not work, not even doing the ordinary household duties. Of course those who are so ill that they cannot move about do not need this advice and their friends help to keep the patient quiet. But the "half-sick" person, the convalescent, and the person showing signs of a beginning sickness do not seem to understand how much quick recovery depends upon rest—sometimes complete rest in bed. This was very forcibly impressed upon the people during the epidemic of influenza and

they quite generally responded to the order of the doctor at that time because they realized the dangerous nature of that disease. The necessity for rest when sick is just as great when only one person is sick as when many people are afflicted with the same disease at the same time.

The reason why it is necessary for patients to rest is that the body resumes the energy-making food from twenty to fifty per cent more rapidly when the person is active than it does when the patient is at rest. When at rest the body uses the food

to increase the number of cells that antagonize the toxins of disease and therefore the patient should recover more quickly than if he were moving about. When the convalescent or "half-sick" person goes about his ordinary tasks he makes his energy-producing organs supply the necessary power (heat from combustion of the food) to do the work and therefore reduces the number of cells that fight the toxins (or increases the quantity of the poisonous toxins). It then amounts to a question whether the toxins or the defending body cells shall gain the victory.

Very recently experiments have been made by government physicians in the Home Economics Division of the U. S. Department of Agriculture that show how easy it is for a person to retard his recovery from disease. It was found by experiments that the mere change of the height of a table at which a well person was working caused an increase of from twenty to forty per cent of calories needed to do the work required. Light tasks such as sewing, crocheting, or embroidering, call for an average expenditure of about 9 calories an hour more than that of the same person sitting quietly in a chair. Tasks regarded as "harder work" than sewing, such as washing, sweeping or scrubbing, require at least 50 calories an hour. If a well person is thus fatigued by a slight change in his usual method of doing his work, we can easily un-

derstand how much greater is the effect of work upon a sick person.

Convalescents from serious illness are often delayed in their recovery by the exhaustion following attempts to work before they have regained their strength, and sensible persons will wait until they are strong before going to work after an illness. In the case of those who feel that they must go to work in order to provide food and shelter for the family, it is very hard to stay indoors and rest, but it is better to do so even though there is less money coming in for the time being. The body recovers its strength rapidly when at rest and every sick person should learn to stay as quiet as possible until he feels his strength has fully returned. Of course he can undertake a little labor from day to day, but we want to impress on sick persons the necessity and the benefit of rest. A little effort from time to time, stopping for rest as soon as fatigue and weariness is noticed, and renewing the work gradually, will give the body a better chance to get well rapidly and stay well. Relapses in sickness are too often due to over-exertion, exhaustion, and refusal to rest. Complete rest in sickness and convalescence gives the doctor the best chance to get the sick person well and gives the sick person the very best chance he can possibly have for his body to utilize every particle of food to build up his strength to the point where he can go to work again without slipping back.

—Exchange.

If every case of communicable disease or suspected communicable disease were reported promptly to the local health officer so that remedial measures could be promptly applied, there would be scant opportunity for such diseases to spread.

The Reporting of Births Important.

Few physicians understand the very great importance of making out birth certificates, and this is a strange fact indeed. If the physicians who do not think about the matter at all, or, thinking a little, conclude that birth certificates are unnecessary, would study the matter a little, they would probably change their minds. We will say further if non-reporting physicians could hear the opinions expressed of them by mothers and relatives who have found it necessary to secure transcripts of birth certificates, their ears would burn almost off. One poor woman, who needed a transcript of the birth of her daughter to prove legitimacy, found her trusted physician had never reported the birth. She said some things in regard to that physician that were not complimentary. Physicians should remember that birth certificates or transcripts of birth certificates are now required before young people may begin work under the provisions of the child labor laws. Birth certificates show when a child is old enough to enter school. They show

whether individuals have attained an age when they may marry without the parents' permission. They show when a person is old enough to vote and when they are subject to jury duty. The birth certificates establish ages in connection with liability for military service and the granting of pensions. They are sometimes necessary as mentioned above, to prove legitimacy. The lack of a properly recorded birth certificate has again and again caused great inconvenience and very serious consequences to the individual many years after birth. The recording of all births from the public health administration point of view is highly desirable. When a physician fails to report a birth, he causes an error in the birth rate, also an error in the infant mortality rates, so it appears that the physician who neglects or refuses to make birth reports is an enemy to his patients, is an enemy to the public and he is also an enemy to profession which he is practicing.—Indiana State Board of Health.

In an ordinance now before the Common Council, the Health Department asks for the maintenance of a temperature of not less than seventy degrees Fahrenheit in occupied buildings whenever the outside temperature falls to below fifty degrees Fahrenheit.

The Department has received numerous complaints from tenants who claim that landlords have refused to furnish adequate heat during the cold season of the year.



FIRST AID TO THE INJURED


Defective Eyesight.

Be sure that your vision is corrected by properly fitted glasses. Have this done by an eye specialist, eye dispensary, or eye hospital. Do not try to fit cheap glasses to your own eyes. Eye strain from badly fitting glasses may in time seriously affect your eyesight or health.

Teeth.

Decayed roots, infected gums, decayed teeth, irregular teeth which cannot grind may cause many forms of serious disease, and should have immediate attention. Get artificial teeth if the grinding teeth are missing, for if you do not properly chew your food your health may suffer. Brush the teeth thoroughly at least twice a day. If you have aching or decayed teeth or much gold work or many fillings make sure that the roots are not diseased; have an X-ray examination made. This is especially important if you have rheumatism or any joint trouble, for which other causes can not be found.

Nasal Catarrh. Adenoids, Enlarged Tonsils, Mouth Breathing.

This condition very commonly develops in childhood and demands careful attention on the part of parents. When properly treated, in some instances by a simple operation, it is often a curable condition. When left untreated it may lead to deformity of the mouth and nose, to poor development of the chest, and to permanent weakness.

Piles, Hemorrhoids.

These are often caused by constipation and lack of exercise. Do not make a habit of using drugs or purgatives. Plenty of bulky food, bran bread or biscuits, fruits, lettuce, spinach, cabbage, brussels sprouts, carrots, turnips, celery, tomatoes, salsify, onions, parsnips, and oyster plant will tend to correct constipation.

If piles are severe, operation will help, but the original cause should be removed by proper diet.

Varicose Veins.

This condition may be relieved by the use of woven elastic bandages or stockings. At times one may consider removal by operation. (Great caution is necessary; consult your family physician.)

Bladder, Kidney, Urinary Troubles.

Go to your physician or to a dispensary or hospital and place yourself under careful medical supervision. Regulation of your diet, work, and activities may be all that is necessary, but your condition should be watched from time to time. Albumin in the urine may be temporary, but should always be followed up and examination made at intervals. Give the benefit of the doubt to your kidneys, and live a temperate and healthful life, avoiding alcoholic stimulants, excess of meat, and overeating generally. Be examined periodically. Sugar in the urine calls for careful medical supervision and regulation of diet and periodic examination by a physician.

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CHILD WELFARE.

Sixteenth Ave. School, cor. Mineral St.—Tuesday 9:30 to 10:30 A. M.

Walker St. School, cor. Greenbush St.—Monday, 3:00 to 4:00 P. M.

Hanover St. School, near Mitchell St.—Friday, 2:00 to 3:00 P. M.

Dover St. School, near Kinnickinnic Ave.—Tuesday, 3:00 to 4:00 P. M.

Fifth Ave. School, near Hayes Ave.—Friday, 9:30 to 10:30 A. M.

Forest Home Ave. School, cor. Tenth Ave.—Wednesday, 9:30 to 10:30 A. M.

Hopkins St. School, cor. Fifteenth St.—Monday, 2:00 to 3:00 P. M.

St. Casimirs School, Clarke & Weil Sts.—Thursday, 2:00 to 3:00 P. M.

St. Hedwigs School, Brady & Franklin—Friday, 3:00 to 4:00 P. M.

Eighth St. School, cor. Sycamore St.—Tuesday, 2:00 to 3:00 P. M.

Detroit St. School, cor. Jackson St.—Thursday, 9:30 to 10:30 A. M.

Abraham Lincoln House, Sherman and 9th—Wednesday, 2:00 to 3:00 P. M.

North Ave. Station, 2920 North Ave.—Wednesday, 2:00 to 3:00 P. M.

HOSPITALS.

SOUTH VIEW HOSPITAL.

Telephone, Orchard 3590.
Visiting Hours, 2:30 to 4 P. M.

BLUE MOUND SANATORIUM.

Telephone, Wauwatosa 64.
Visiting Hours, 3 to 5 P. M.

VACCINES, ANTITOXINES.

Free antitoxine for diphtheria and tetanus, small pox vaccine, typhoid vaccine, may be had at the following stations:

Health Department, City Hall.

Emergency Hospital.

South Side Contagious Disease Hospital.

Union Pharmacy, 1120 Walnut St.

Wright Drug Co., 328 Grove St.

The department also arranges for medical and material relief for indigent patients through the County Poor Office and private agencies.

UNIVERSITY OF ILLINOIS-URBANA



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